### OUTPATIENT RESOURCE COSTING STUDY

FINAL REPORT

VOLUME II - APPENDICIES

AUGUST 7, 1995



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Prepared by: Center for Health Policy Studies

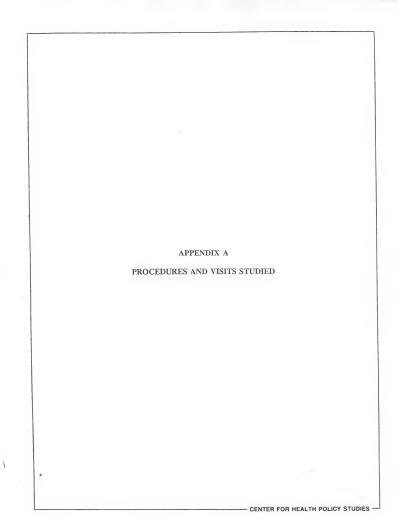
Henry Miller, Ph.D., Project Director

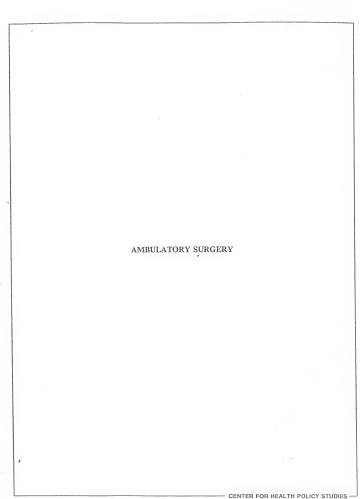
William Kelly Horen Boyagian John McCue JoAnna Burnette

Joanna Burnette

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		OUTPATIENT SURGICAL PROCEDURES
APG	CPT	
	CODE	CPT DESCRIPTION
3		Incision and drainage of infected or noninfected sebaceous cyst
3		Incision and drainage of abscess (eg, carbuncle, suppurative
3		Incision and removal of foreign body, subcutaneous tissues, simple
4		Incision and drainage of hematoma; complicated
4		Incision and drainage, complex, postoperative wound infection
6		Debridement skin, partial thickness
7		Excision, benign lesion, except skin tag (unless listed elsewhere)
8		Excision, benign lesion, except skin tag (unless listed elsewhere)
8		Excision, benign lesion, except skin tag (unless listed elsewhere)
7		Excision, other benign lesion (unless listed elsewhere), face, ears
7		Excision, malignant lesion, trunk, arms, legs lesion diameter 0.6
7		Excision, malignant lesion, face, ears, eyelids, nose, lips lesion
8		Excision, malignant lesion, face, ears, eyelids, nose, lips lesion
5		Debridement of nails, manual; five or less
5		Debridement of nails, manual, each additional; five or less
6		Avulsion of nail plate, partial or complete, simple single
10		Simple repair of superficial wounds of scalp, neck, axillae, external
10		Simple repair of superficial wounds of scalp, neck, axillae, external
11	12015	Simple repair of superficial wounds of face, ears, eyelids, nose
11		Simple repair of superficial wounds of face, ears, eyelids, nose
10	12031	Layer closure of wounds of scalp, axillae, trunk and/or extremities
11	12054	Layer closure of wounds of face, ears, eyelids, nose, lips
12	14060	Adjacent tissue transfer or rearrangement, eyelids, nose, ears
12	15100	Split graft, trunk, scalp, arms, legs, hands, and/or feet
12	15260	Full thickness graft, free, including direct closure of donor site
11	15822	Blepharoplasty, upper eyelid
9	15839	Excision, excessive skin and subcutaneous tissue
9	15972	Excision, leg pressure ulcer, with local skin flap(s)
6	17000	Destruction by any method, with or without surgical curettement
2	19000	Punction aspiration of cyst of breast
2	19100	Biopsy of breast needle (separate procedure)
27		Biopsy of breast incisional
27		Excision of cyst, fibroadenoma, or other benign or malignant tumor
28		Mastectomy for gynecomastia through circumareolar or other incision
28		Mastectomy, partial
28		Mastectomy, subcutaneous
76	20550	Injection, tendon sheath, ligament, trigger points or ganglion cyst
76	20605	Arthrocentesis, aspiration and/or injection intermediate joint, bursa
76		Arthrocentesis, aspiration and/or injection major joint or bursa
		Removal of implant superficial, (eg, buried wire, pin or rod)
- 59		Treatment of rib fracture closed, uncomplicated, each
74		Repair of complete shoulder (rotator) cuff avulsion, chronic
63		Manipulation under anesthesia, shoulder joint, including application
		Incision and drainage, upper arm or elbow area infected bursa
69		Excision, olecranon bursa
- 66		Tendon sheath incision at radial styloid for Dequervain's disease
74		Repair, tendon or muscle, flexor, forearm and/or wrist primary
70		Interposition arthroplasty, intercarpal or carpometacarpal joints
60		Treatment of closed distal radial fracture (eg, Colles or Smith type)
00	1 23000	I reatment of closed distal radial fracture (eg. Colles or Smith type)

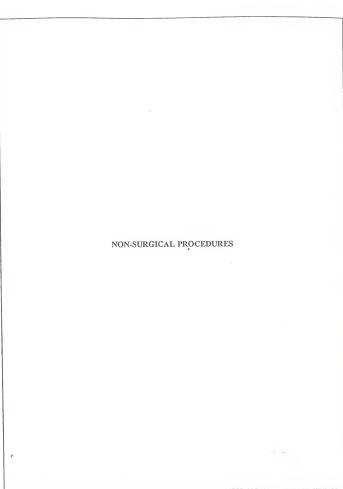
		OUTPATIENT SURGICAL PROCEDURES
APG	CPT	
	CODE	CPT DESCRIPTION
60	25605	Treatment of closed distal radial fracture (eg, Colles or Smith type)
62	25615	Treatment of open distal radial fracture (eg, Colles or Smith type)
62	25620	Open treatment of closed or open distal radial fracture (eg, Colles
72		Tendon sheath incision for trigger finger
68	26160	Excision of lesion of tendon sheath or capsule (eg, cyst, mucous
71	26455	Tenotomy, flexor, single, finger, open, each
70	26535	Arthroplasty interphalangeal joint single, each
59	26720	Treatment of closed phalangeal shaft fracture, proximal or middle
62	26735	Open treatment of closed or open phalangeal shaft fracture, proximal
73	26860	Arthrodesis, interphalangeal joint, with or without internal fixation
75	27332	Arthrotomy, knee, for excision of semilunar cartilage (meniscectomy)
75	27333	Arthrotomy, knee, for excision of semilunar cartilage (meniscectomy)
69	27345	Excision of synovial cyst of popliteal space (Baker's cyst)
63	27570	Manipulation of knee joint under general anesthesia
4	28002	Deep dissection below fascia, for deep infection of foot
68	28080	Excision of interdigital (Morton) neuroma, single, each
71	28234	Tenotomy, open, extensor, foot or toe
- 66	28270	Capsulotomy for contracture metatarsophalangeal joint
72		Hammertoe operation one toe (eg, interphalangeal fusion, filleting
67	28200	Hallux valgus (bunion) correction, with or without sesamoidectomy
67	20290	Hallux valgus (bunion) correction, with or without sesamoidectomy
- 60	20292	Treatment of closed metatarsal fracture with manipulation, each
73		Amputation, metatarsal, with toe, single
- 57	20076	Application elbow to finger (short arm)
- 58	20125	Application of short arm splint (forearm to hand) static
	2912	Application of short leg cast (below knee to toes)
57		Strapping unna boot
51		Arthroscopy, shoulder, diagnostic, with or without synovial biopsy
5:	29813	Arthroscopy, shoulder, diagnostic, with or without synovial biopsy
	29870	Arthroscopy, knee, diagnostic, with of without synovial diopsy
5	2987	Arthroscopy, knee, surgical debride membranding of arthroscopy, knee, sugical with meniscectomy (medial or lateral
5	2988	Drainage abscess or hematoma, nasal, internal approach
6	1 3000	D Excision, nasal polyp(s), simple unilateral
6		
6	4 3011	1 Excision, nasal polyp(s), simple bilateral
6	3052	O Septoplasty or submucous resection, with or without cartilage
6	3062	Reconstruction, functional, internal nose (septal or other intranasal
- 8	5 3090	1 Control nasal hemorrhage, anterior, simple (cauterization) unilateral
8	5 3090	3 Control nasal hemorrhage, anterior, complex (cauterization) with loc
	4 3102	O Sinusotomy, maxillary (antrotomy) intranasal, unilateral
_	8 3103	O Sinusotomy, maxillary (antrotomy) radical, unilateral (Caldwell-Luc
		0 Ethmoidectomy intranasal, anterior
11	7 3150	0 Intubation, endotracheal, emergency procedure
8	1 3150	5 Laryngoscopy, indirect (separate procedure) diagnostic
	1 3151	O Laryngosocpy, indirect (separate procedure) with biopsy
	2 3153	Laryngoscopy, direct, operative, with biopsy
	3154	Laryngoscopy, direct, operative, with excision of tumor
- 1		22 Bronchoscopy diagnostic, (flexible or rigid), with or without cell
- 1	33 3162	25 Bronchoscopy with biopsy
	34 3162	28 Bronchoscopy with transbronchial lung biopsy

		O I Work on the last of the la
100	OPT	OUTPATIENT SURGICAL PROCEDURES
APG	CODE	ONE DEAGNAPHIE
		CPT DESCRIPTION  Bronchoscopy with transbronchial needle aspiration biopsy
80	32000	Thoracentesis, puncture of pleural cavity for aspiration, initial
112	32403	Biopsy, lung or mediastinum, percutaneous needle
113	33212	Insertion or replacement of pacemaker pulse generator or automatic
112	33210	Insertion, replacement, or repositioning of permanent transvenous Repair of pacemaker with replacement of pulse generator
114		Thrombectomy and/or repair of arterial or venous graft
133		Transfusion, blood or blood components
133		Push transfusion, blood, 2 years or under
134	36455	Exchange transfusion, blood other than newborn
109	36490	Placement of central venous catheter (subclavian, juglar, or other
114	36405	Insertion of implantable intravenous infusion pump or venous access
113	36407	Removal of implantable intravenous infusion pump or venous access
134	36520	Therapeutic apheresis (plasma and/or cell exchange)
109	36960	Cannula declotting without balloon catheter
		Ligation, major artery (eg, post-traumatic, rupture) extremity
116	37010	Interruption, partial or complete, of femoral vein, by ligature
	37730	Ligation and division and complete stripping of long or short
9	27725	Ligation and division and complete stripping of long or short
	27795	Ligation, division, and/or excision of secondary varicose veins
115	37700	Unlisted procedure, vascular surgery
135	20510	Biopsy or excision or lymph node(s) deep cervical node(s)
135	20525	Biopsy or excision of lymph node(s) deep axillary node(s)
87	40500	Vermilionectomy (lip shave), with mucosal advancement
86	41110	Excision of lesion of tongue without closure
86		Excision of lesion of tongue without closure  Excision of lesion of tongue with closure anterior two-thirds
87	42410	Excision of parotid tumor or parotid gland lateral lobe
167	42410	Tonsillectomy and adenoidectomy age 12 or over
167		Tonsillectomy, primary or secondary age 12 or over
162	42020	Upper gastrointestinal endoscopy including esophagus, stomach
162	43233	Upper gastrointestinal endoscopy including esophagus, stomach
163		
163	43243	Upper gastrointestinal endoscopy including esophagus, stomach
166	43240	Upper gastrointestinal endoscopy including esophagus, stomach Endoscopic retrograde cholangiopancreatography (ERCP)
158	43200	Dilation of esophagus, by unguided sound or bougie, single or
158	43450	Dilation of esophagus, by unguided sound or bougie, single or
173	43431	Percutaneous placement of gastrostomy tube
172	43750	Change of gastrostomy tube
166	43700	Small intestinal endoscopy beyond second portion of
171	45170	Excision of rectal tumor, transanal approach
160		Proctosigmoidoscopy diagnostic (separate procedure)
160	45330	Sigmoidoscopy diagnostic (separate procedure) Sigmoidoscopy, flexible fiberoptic diagnostic
161	45330	Signoidoscopy, nexible fiberoptic diagnostic
161	45331	Sigmoidoscopy, flexible fiberoptic for biopsy and/or collection of
164	45333	Sigmoidoscopy, flexible fiberoptic for removal of polypoid lesion(s)
164	45378	Colonoscopy, fiberoptic, beyond splenic flexure diagnostic procedure
165	45380	Colonoscopy, fiberoptic, beyond splenic flexure for biopsy and/or
	45383	Colonoscopy, fiberoptic, beyond splenic flexure for ablation of tumor
165	45385	Colonoscopy, fiberoptic, beyond splenic flexure for removal of
1/0	45915	Removal of fecal impaction or foreign body (separate procedure)

		OUTPATIENT SURGICAL PROCEDURES
APG	CPT	OUTPATIENT SURGICAL PROCEDURES
	CODE	CPT DESCRIPTION
CODE	46200	Fissurectomy, with or without sphincterotomy
1/0	46230	Excision of external hemorrhoid tags and/or multiple papillae
171	40230	Hemorrhoidectomy internal and external, simple
160	46610	Anoscopy for removal of polyp
169	46024	Destruction of hemorrhoids, any method internal
159	47000	Biopsy of liver, percutaneous needle
172	47000	Peritoneocentesis, abdominal paracentesis, or peritoneal lavage
159	49080	Biopsy, abdominal or retroperitoneal mass, percutaneous needle
173	49100	Insertion of intraperitoneal cannula or catheter for drainage
168	49421	Repair inguinal hernia, age 5 or over
168		Repair inguinal hernia, any age recurrent
100	50303	Introduction of intracatheter or catheter into renal pelvis for
190	50392	Introduction of ureteral catheter or stent into ureter through renal
190	50500	Lithotripsy, extracorporeal shock wave
100	50053	Ureteral endoscopy through established ureterostomy,
190	51010	Aspiration of bladder with insertion of suprapubic catheter
101	51020	Cystotomy or cystostomy with fulguration and/or insertion of
191	51040	Cystostomy or cystostomy with range and the street
101	51040	Cystotomy, cystotomy with dramage
191	51720	Bladder instillation of anticarcinogenic agent
10.	51726	Simple cystometrogram (CMG) (eg, spinal manometer)
183	5172	Simple cystometrogram (cryo) (eg, spanish and simple uroflowmetry (UFR) (eg, stop-watch flow rate, mechanical
18		Cystourethroscopy (separate procedure)
189	5222	Cystourethroscopy, with fulguration (including cryosurgery or laser
18	5222	Cystourethroscopy, with fulguration (including cryosurgery or laser
18	5223	Cystourethroscopy, with raightation and/or dilation of urethral
- 10	1 5250	Transurethral resection of bladder neck (separate procedure)
21	4 5260	1 Transurethral resection of prostate, including control of
		O Biopsy of urethra
19	2 5320	0 Excision or fulguration of carcinoma of urethra
- 19	3 3322	5 Excision of urethral diverticulum (separate procedure) male
		5 Excision of fulguration urethral caruncle
19	5 5366	O Dilation of female urethra including suppository and/or instillation
		O Catheterization, urethra simple
- 18	3 5307	2 Circumcision, clamp procedure except newborn
- 21	2 5415	1 Circumcision, surgical excision other than clamp or dorsal slit
- 21	0 5440	O Insertion of penile prosthesis non-inflatable (semi-rigid)
- 21	1 5440	12 Removal or replacement of non-inflatable (semi-rigid) or inflatable
	0 5440	25 Insertion of inflatable (multi-component) penile prosthesis
- 2	1 5440	77 Removal, repair, or replacement of inflatable (multi-component)
	9 5452	20 Orchiectomy, simple (including subcapsular),
		Orchiectomy, simple (including subcapsular), 21 Orchiectomy, simple (including subcapsular), with or without
	)9 5452 13 5570	Di Biopsy, prostate needle or punch, single or multiple, any approach
	3 3370	Di Biopsy, prostate incisional, any approach
	13 5570	Di Biopsy of vulva (separate procedure)
	12 566	20 Vulvectomy partial, unilateral or bilateral (less than 80% of
	44 571	35 Excision of vaginal cyst or tumor 52 Colposcopy (vaginoscopy) (separate procedure)
	41 574	52 Colposcopy (vaginoscopy) (separate procedure) 54 Colposcopy (vaginoscopy) with biopsies, or biopsy of the cervix
2	41 574	54 Corposcopy (vaginoscopy) with biopsies, or biopsy of the cervix

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APG	CPT	OUTPATIENT SURGICAL PROCEDURES
	CODE	CPT DESCRIPTION
		Biopsy of cervix, circumferential (cone), with or without dilation
		Dilation and curettage of cervical stump
		Dilation and curettage of cervical stump
		Artificial insemination
		Artificial insemination with sperm washing and capacitation
240	50000	Laparoscopy for visualization of pelvic viscera
240	58960	Laparoscopy for visualization of pelvic viscera with lysis of
		Fetal non-stress test
		Initiation and/or supervision of internal fetal monitoring during
		Treatment of spontaneous abortion, first trimester completed
237	59801	Treatment of spontaneous abortion, first trimester completed  Treatment of missed abortion, any trimester, completed medically or
238	59820	Legal (therpeutic) abortion, by dilation and curettage
238	50941	Legal (therapeutic) abortion, by dilation and evacuation
238	60100	Biopsy thyroid, percutaneous needle
265	62225	Replacement or irrigation, ventricular catheter
		Spinal puncture, lumbar, diagnostic
		Spinal puncture, therapeutic, for drainage of spinal fluid
264		Injection of anesthetic substance (including narcotics), diagnostic
264		Injection of anesthetic substance (including narcours), diagnostic
268		Percutaneous implantation of neurostimulator electrodes epidural
267		
	63600	Revision or removal of spinal neurostimulator electrodes Revision or removal of spinal neurostimulator receiver
267		Replacement, irrigation or revision of lumbosubarachnoid shunt
265		Injection, anesthetic agent stellate ganglion (cervical sympathetic)
266		Injection, anesthetic agent stellate ganglion (cervical sympathetic)  Inject, anesthetic agent lumbar or thoracic (paravertebral)
266		Percutaneous implantation of neurostimulator electrodes autonomic
	64300	Neuroplasty and/or transposition ulnar nerve at elbow
270	64718	Neuroplasty and/or transposition ulnar nerve at e150w  Neuroplasty and/or transposition ulnar nerve at wrist
269		Neuroplasty and/or transposition unar nerve at wrist  Neuroplasty and/or transposition median nerve at carpal tunnel
271		Suture of digital nerve, hand or foot, one nerve
271		Suture of one nerve, hand or foot, common sensory nerve
294	65450	Destruction of lesion of cornea by cryotherapy, photocoagulation
296	65/50	Keratoplasty (corneal transplant), penetrating (in aphakia)
289	65855	Trabeculoplasty by laser surgery, one or more sessions
293		Fistulization of sclera for glaucoma trephination with iridectomy
293		Fistulization of sclera for glaucoma trabeculectomy ab externo
292	66500	Iridotomy by stab incision (separate procedure) except transfixion
295	66625	Iridectomy, with corneoscleral or corneal section peripheral for
292		Cyclocryotherapy initial
294		Discission of secondary membraneous cataract ('after cataract')
289		Discission of secondary membraneous cataract ('after cataract')
295		Removal of secondary membraneous cataract ('after cataract')
291	66850	Removal of lens material, phacofragmentation technique
291	66940	Extraction of lens with or without iridectomy extracapsular
291		Intracapsular cataract extraction with insertion of intraocular lens
291		Extracapsular cataract removal with insertion of intraocular lens
291		Insertion of intraocular lens subsequent to cataract removal
290	67010	Removal of vitreous, anterior approach (open sky technique or limbal)
298	67036	Vitrectomy, mechanical, pars plana approach

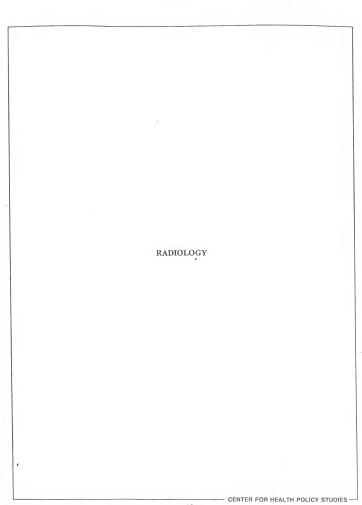
		OUTPATIENT SURGICAL PROCEDURES
APG	CPT	S S S S S S S S S S S S S S S S S S S
CODE	CODE	CPT DESCRIPTION
298	67101	Repair of retinal detachment, one or more sessions cryotherapy
290	67105	Repair of retinal detachment, one or more sessions photocoagulation
297	67208	Destruction of localized lesion of retina (eg, maculopathy,
297	67227	Destruction of extensive or progressive retinopathy
290		Destruction of extensive or progressive retinopathy
299		Strabismus surgery on patient not previously operated on
299	67312	Strabismus surgery on patient not previously operated on
300	67840	Excision of lesion of eyelid (except chalazion) without closure or
301	67904	Repair of blepharoptosis (tarso) levator resection, external approach
300	67921	Repair of entropion suture
301	68720	Dacryocystorhinostomy (fistulization of lacrimal sac to nasal cavity)
314		Excsion exostosis(es), external auditory canal
319	69210	Removal impacted cerumen (separate procedure), one or both ears
314	69310	Reconstruction of external auditory canal (meatoplasty)
315		Myringotomy including aspiration and/or eustachian tube inflation
315	69433	Tympanostomy (requiring insertion of ventilating tube), local or
316	69631	Tympanoplasty with mastoidectomy (including canalplasty
316	69660	Stapedectomy with reestablishment of ossicular continuity
317		Endolymphatic sac operation with shunt
317	69840	Revision fenestration operation



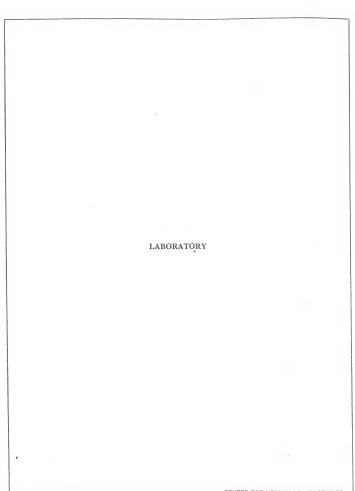
		NOV WINGLE IN PROPERTY
		NON-SURGICAL PROCEDURES
APG	CPT-4	Description
449	90724	IMMUNIZATION, ACTIVE INFLUENZA VIRUS VACCINE
451	90731	IMMUNIZATION, ACTIVE HEPATITIS B VACCINE
450	90732	IMMUNIZATION, ACTIVE PNEUMOCOCCAL VACCINE, POLYVALENT
262	90870	ELECTROCONVULSIVE THERAPY (INCLUDES NECESSARY MONITORING) SINGLE SEIZ
262	90871	ELECTROCONVULSIVE THERAPY (INCLUDES NECESSARY MONITORING) MULTIPLE SE
186	90935	HEMODIALYSIS PROCEDURE WITH SINGLE PHYSICIAN EVALUATION
186	90937	HEMODIALYSIS PROCEDURE REQUIRING REPEATED EVALUATION(S) WITH OR WITHO
187	90945	DIALYSIS PROCEDURE OTHER THAN HEMODIALYSIS (EG, PERITONEAL, HEMOFILTR
187	90947	DIALYSIS PROCEDURE OTHER THAN HEMODIALYSIS (EG, PERITONEAL, HEMOFILTR
159	91000	ESOPHAGEAL INTUBATION AND COLLECTION OF WASHINGS FOR CYTOLOGY, INCLUD
157	91010	ESOPHAGEAL MOTILITY STUDY
157	91030	ESOPHAGUS, ACID PERFUSION (BERNSTEIN) TEST FOR ESOPHAGITIS
288	92070	FITTING OF CONTACT LENS FOR TREATMENT OF DISEASE, INCLUDING SUPPLY OF
287	92235	OPHTHALMOSCOPY, WITH MEDICAL DIAGNOSTIC EVALUATION WITH FLUORESCEIN A
287	92250	OPHTHALMOSCOPY, WITH MEDICAL DIAGNOSTIC EVALUATION WITH FUNDUS PHOTOG
288	92311	PRESCRIPTION OF OPTICAL AND PHYSICAL CHARACTERISTICS OF AND FITTING O
77	92507	SPEECH, LANGUAGE OR HEARING THERAPY, WITH CONTINUING MEDICAL SUPERVIS
	92508	SPEECH, LANGUAGE OR HEARING THERAPY, WITH CONTINUING MEDICAL SUPERVIS
312	92545	OSCILLATING TRACKING TEST, WITH RECORDING
318	9255	BASIC COMPREHENSIVE AUDIOMETRY (92553 AND 92556 COMBINED), (PURE TONE
318	9256	TYMPANOMETRY
313	9258	BRAINSTEM EVOKED RESPONSE RECORDING
11	9295	CARDIOPULMONARY RESUSCITATION (E.G., IN CARDIAC ARREST)
10:	9296	CARDIOVERSION, ELECTIVE, ELECTRICAL CONVERSION OF ARRHYTHMIA, EXTERNA
11	1 9298	PERCUTANEOUS TRANSLUMINAL CORONARY ANGIOPLASTY SINGLE VESSEL
	1	

		NON-SURGICAL PROCEDURES
APG	CPT-4	Description
447	93000	ELECTROCARDIOGRAM, ROUTINE ECG WITH AT LEAST 12 LEADS WITH INTERPRETA
105	93015	CARDIOVASCULAR STRESS TEST USING MAXIMAL OR SUBMAXIMAL TREADMILL OR B
105	93017	CARDIOVASCULAR STRESS TEST USING MAXIMAL OR SUBMAXIMAL TREADMILL OR B
447	93040	RHYTHM ECG, ONE TO THREE LEADS WITH INTERPRETATION
107	93201	PHONOCARDIOGRAM WITH ECG LEAD WITH SUPERVISION DURING RECORDING WITH
		_
107	93205	PHONOCARDIOGRAM WITH ECG LEAD, WITH INDIRECT CAROTID ARTERY AND/OR JU
454	93262	ELECTROCARDIOGRAPHIC MONITORING, 12 THROUGH 24 HOURS OF CONTINUOUS AN
106	93307	ECHOCARDIOGRAPHY, REAL-TIME WITH IMAGE DOCUMENTATION (2D) COMPLETE
106	93320	DOPPLER ECHOCARDIOGRAPHY
110	93547	COMBINED LEFT HEART CATHETERIZATION, SELECTIVE CORONARY ANGIOGRAPHY,
110	93549	COMBINED RIGHT AND LEFT HEART CATHETERIZATION, SELECTIVE CORONARY ANG
		,
108	93618	INDUCTION OF ARRHYTHMIA BY ELECTRICAL PACING
454	93870	NON-INVASIVE STUDIES OF CAROTID ARTERIES, IMAGING (EG, FLOW IMAGING B
443	94010	SPIROMETRY, INCLUDING GRAPHIC RECORD, TOTAL AND TIMED VITAL CAPACITY,
-		
443	94060	BRONCHOSPASM EVALUATION: SPIROMETRY AS IN 94010, BEFORE AND AFTER BRO
79	94630	INTERMITTENT POSITIVE PRESSURE BREATHING (IPPB) TREATMENT, AIR OR OXY
	0.170	ANALYSIS OF APTERIAL PLOOP CAS (OVEGEN SATERATION POST POST COST PER
420	94700	ANALYSIS OF ARTERIAL BLOOD GAS (OXYGEN SATURATION, PO2, PC02, C02, PH
	0.176	NAME OF THE ORDER OF DAY OF DA
79	94760	NONINVASIVE EAR OR PULSE OXIMETRY FOR OXYGEN SATURATION SINGLE DETERM
12	0600	DEPOSITE A MICOLINE TEXTS (CON A TOLL DEMOCRATIC DESCRIPTION AND THE ALL EDGENIO TWO ACT
130	9300	PERCUTANEOUS TESTS (SCRATCH, PUNCTURE, PRICK) WITH ALLERGENIC EXTRACT
130	0600	DETENDING THE ADEDMAN THE STORY WITH ALL EDGENIC EVER ACTOR BOARDAY
131	9302	INTRACUTANEOUS (INTRADERMAL) TESTS WITH ALLERGENIC EXTRACTS, IMMEDIAT
26	0601	ELECTROENCEPHALOGRAM (EEG) INCLUDING RECORDING AWAKE, DROWSY, AND ASL
	9361	ELECTROPICE FIRECORAM (ESO) ENCEDENG RECORDENG AWARD, DROWN 1, AND ASE
26	1 0502	POLYSOMNOGRAPHY (RECORDING, ANALYSIS AND INTERPRETATION OF THE MULTIP
	7302	POETSOMINOGRAFITI (RECORDERG, MINETSES AND ENTERS RETATION OF THE MODELE
26	3 0500	NERVE CONDUCTION, VELOCITY AND/OR LATENCY STUDY MOTOR, EACH NERVE
20	9390	PIREATE CONDUCTION, TELECTIC ANDION EXTENCT STODY MOTOR, EXCHINERAE
26	3 0500	4 NERVE CONDUCTION, VELOCITY AND/OR LATENCY STUDY SENSORY, EACH NERVE
20	9390	THERE CONDUCTION, TELECTIT MILITON ENGINEET STUDY SENSONT, EACH NEXTE
13	2 0650	CHEMOTHERAPY INJECTION, INTRAVENOUS, SINGLE PREMIXED AGENT, ADMINISTE
13	7030	CHARTETE TOO, INTOTATOOS, SINGLE TRANSCED ROLLT, ADMINISTE
		1

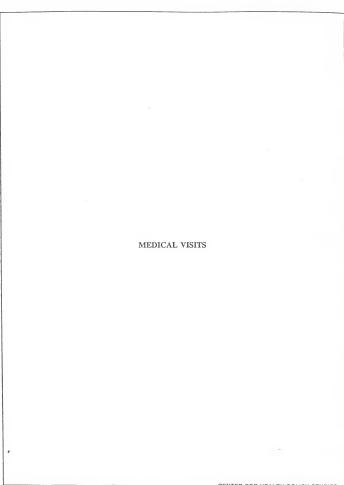
		NON-SURGICAL PROCEDURES
APG	CPT-4	Description
131	96501	CHEMOTHERAPY INJECTION, INTRAVENOUS, SINGLE PREMIXED AGENT, ADMINISTE
131	96509	CHEMOTHERAPY INJECTION, INTRAVENOUS, COMPLEX, USING ONE OR MORE AGEN
131	96510	CHEMOTHERAPY INJECTION, INTRAVENOUS, COMPLEX, USING ONE OR MORE AGEN
132	96549	UNLISTED CHEMOTHERAPY PROCEDURE
1	96900	ACTINOTHERAPY (ULTRAVIOLET LIGHT)
1	96912	PHOTOCHEMOTHERAPY PSORALENS AND ULTRAVIOLET A (PUVA)
54	97010	PHYSICAL-MEDICINE TREATMENT TO ONE AREA HOT OR COLD PACKS
54	97128	PHYSICAL MEDICINE TREATMENT TO ONE AREA, INITIAL 30 MINUTES, EACH VIS
53	97540	TRAINING IN ACTIVITIES OF DAILY LIVING (SELF CARE SKILLS AND/OR DAILY
53	97541	TRAINING IN ACTIVITIES OF DAILY LIVING (SELF CARE SKILLS AND/OR DAILY



		RADIOLOGY PROCEDURES
APG	CPT	CPT DESCRIPTION
CODE	CODE	
349		Computerized axial tomography, head or brain without contrast
349		Computerized axial tomography, head or brain without contrast
348		Magnetic resonance (eg, proton) imaging, brain (including brain stem)
351		Radiologic examination, chest, single view, frontal
351		Radiologic examination, chest, two views, frontal and lateral
352	71023	Radiologic examination, chest, two views, frontal and lateral with
359		Myelography, lumbosacral; complete procedure
358		Radiologic examination, shoulder, arthrography; complete procedure
351	73510	Radiologic examination, hip, complete, minimum of two views
351		Radiologic examination, foot, complete, minimum of three views
349		Computerized axial tomography, abdomen with contrast material(s)
356	74240	Radiologic examination, gastrointestinal tract, upper with or without
356		Radiologic examination, colon barium enema
356		Radiologic examination, colon air contrast with specific high density
357		Urography (pyelography), intravenous, with or without KUB
357		Urography, infusion, drip technique and/or bolus technique with
355	75631	Aortography, abdominal plus bilateral iliofemoral lower extremity
353		Angiography, carotid, cerebral, bilateral catheter; complete
354	75821	Venography, extremity, unilateral; complete procedure
111	75963	Percutaneous transluminal angioplasty, any method, peripheral artery
360	76089	Mammary ductogram or galactogram, multiple ducts; complete procedure
350	76091	Mammography; bilateral
346	76519	Ophthalmic biometry by ultrasound echography, A-mode with intraocular
346	76700	Echography, abdominal, B-scan and/or real time with image
345	76805	Echography, pregnant uterus, B-scan and/or real time with image
344	77430	Weekly megavoltage treatment management complex
341	78306	Bone imaging; whole body
342	78461	Myocardial perfusion imaging exercise and redistribution, qualitative
343	79100	Radionuclide therapy, polycythemia vera, chronic leukemia, each
		*



		LABORATORY PROCEDURES
APG	CPT	CPT DESCRIPTION
CODE	CODE	
428		Automated multichannel test 13-16 clinical chemistry tests
428		Automated multichannel test, 19 or more clinical chemistry tests
431		Urinalysis routine (pH, specific gravity, protein, tests for
431	81002	Urinalysis routine, without microscopy
426		Blood occult, feees, screening
433		Digoxin, RIA
429		Immunoassay technique for druga
425	82947	Glucose except urine (eg, blood, spinal fluid, joint fluid)
440		Glucose blood, stick test
430	83015	Heavy metal screen (arsenic, bismuth, mercury, antimony) chemical
427	83036	Hemoglobin glycosylated (A1C)
424		Hydroxyproline, urine free only
427	83718	Lipoprotein high density cholesterol (HDL cholesterol) by
427	83720	Lipoprotein cholesterol fractionation calculation by formula
439	83725	Lithium, blood, quantitative
432	84045	Phenytoin
425	84132	Potassium blood
432	84420	Theophylline, blood or saliva
423	84435	Thyroxine, (T-4), CPB or reain uptake
433	84436	Thyroxine, true (TT-4), RIA
423	84442	Thyroxine binding globulin (TBG)
433	84443	Thyroid stimulating hormone (TSH), RIA or EIA
425		Triglycerides, blood
426	84479	Triiodothyronine (T-3), resin uptake
436		Blood count bemogram, automated, and manual differential WBC count
436		Blood count hemogram, manual, complete CBC (RBC, WBC, HGB, HCT
435		Clotting factor II, prothrombin, specific
434		Prothrombin time
434	85730	Thromoboplastin time, partial (PTT) plasma or whole blood
437		Unlisted hematology procedure
417		Blood crossmatch antiglobulin technique
433		Carcinoembryonic antigen (CEA) RIA or EIA
415		Radioallergosorbent test, in vitro testing for allergen-specific IGE
419		Rheumatoid factor, latex fixation
420		Unlisted immunology procedure
423		O Culture, bacterial, definitive blood (includes anaerobic screen)
423		Culture, bacterial, definitive stool
42		O Culture, bacterial, definitive any other source
42		6 Culture, bacterial, urine quantitative, colony count
42		8 Culture, bacterial, urine identification, in addition to quantitative
42		Culture, fungi, isolation skin
42		1 Culture, fungs, isolation skin 7 Ova and parasites, direct smears, concentration and identification
-		
42		4 Sensitivity studies, antibiotic disk method, per plate (12 or less
42		5 Smear, primary source, with interpretation routine stain for
42		0 Smear, primary source, with interpretation wet mount with simple
39		0 Cytopathology, amears, cervical or vaginal (eg, papanicolaou)
39		4 Surgical pathology, gross and microscopic examination of
39	1 8920	5 Occult blood, any source except feces



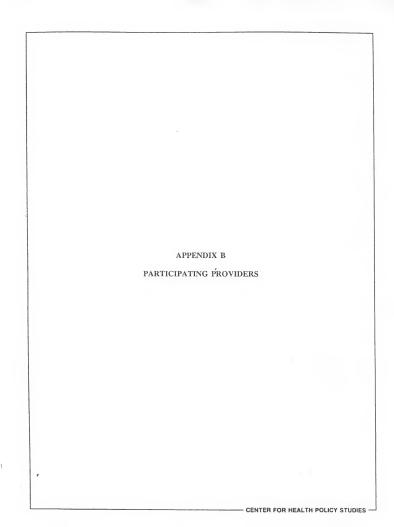
		MEDICAL VISITS
APG	ICD-9	
602		MALIGN NEOPL PROSTATE
		AND MARK A PROPERTY AND A PROPERTY A
860	217	BENIGN NEOPLASM BREAST
647	319	MENTAL RETARDATION NOS
736	436	CVA
783	486	PNEUMONIA, ORGANISM NOS
785	496	CHR AIRWAY OBSTRUCT NEC
887	585	CHRONIC RENAL FAILURE
901	600	HYPERPLASIA OF PROSTATE
933	429	AIDS, UNSPECIFIED
932	439	ARC, UNSPECIFIED
856	1101	DERMATOPHYTOSIS OF NAIL
721	1369	INFECT/PARASITE DIS NOS
603	1629	MAL NEO BRONCH/LUNG NOS
604	1739	MALIG NEO SKIN NOS
60.	1749	MALIGN NEOPL BREAST NOS
60	1 2040	ACUTE LYMPHOID LEUKEMIA
87	3 272	PURE HYPERCHOLESTEROLEM
87	2 278	OBESITY
93	3 280	9 IRON DEFIC ANEMIA NOS
93	3 281	9 DEFICIENCY ANEMIA NOS
64	8 290	0 SENILE DEMENTIA UNCOMP
66	3 292	0 DRUG WITHDRAWAL SYNDROME
- 64	6 312	9 CONDUCT DISTURBANCE NOS

		MEDICAL VISITS
	ICD-9	
754	3659	GLAUCOMA NOS
751	3669	CATARACT NOS
752	3679	REFRACTION DISORDER NOS
772	3804	IMPACTED CERUMEN
773	3829	OTITIS MEDIA NOS
771	3800	HEARING LOSS NOS
	3077	MEARING EGGS NOS
797	4010	HADED TENGTON NOC
191	4019	HYPERTENSION NOS
796	4139	ANGINA PECTORIS NEC/NOS
800	4140	CORONARY ATHEROSCLEROSIS
796	4149	CHR ISCHEMIC HRT DIS NOS
827	4275	CARDIAC ARREST
		,
796	4280	CONGESTIVE HEART FAILURE
- 1,70	1200	CONCECTIVE THE RELEASE OF THE PARTY OF THE P
773	4650	ACUTE URI NOS
	4039	ACOTE OIG NOS
010	5255	CACTRITION I CONTAINING MAG
812	3333	GASTRITIS/DUODENITIS NOS
811	5589	NONINF GASTROENTERIT NEC
813	5640	CONSTIPATION
816	5693	RECTAL & ANAL HEMORRHAGE
886	5990	URIN TRACT INFECTION NOS
	-	The state of the bottom too
888	5007	HEMATURIA
- 000	3331	NEWATORIA
		DN OOD ATTITUDE VEGE
902	6015	PROSTATITIS NOS
858	6829	CELLULITIS NOS
860	6929	DERMATITIS NOS
	T	
860	6961	OTHER PSORIASIS
	1 0,00	
	1	

		MEDICAL VISITS
	ran a	
APG 857	ICD-9 7071	CHRONIC ULCER OF LEG
860	7099	SKIN DISORDER NOS
933	7100	SYST LUPUS ERYTHEMATOSUS
842	7140	RHEUMATOID ARTHRITIS
841	7242	LUMBAGO
842	7295	PAIN IN LIMB
676	7600	MATERN HYPERTEN AFF NB
738	7803	CONVULSIONS
737	7840	HEADACHE
769	7847	EPISTAXIS
888	7882	RETENTION OF URINE
817	7890	ABDOMINAL PAIN
633	8208	FX NECK OF FEMUR NOS-CL
632	8830	OPEN WOUND OF FINGER
634	8970	AMPUT BELOW KNEE, UNILAT
616	9895	TOXIC EFFECT VENOM
860	995	3 ALLERGY, UNSPECIFIED
94	7 V202	ROUTIN CHILD HEALTH EXAM
69	1 V221	SUPERVIS OTH NORMAL PREG
97	6 V222	PREG STATE, INCIDENTAL
69	3 V242	ROUT POSTPART FOLLOW-UP
63	2 V583	ATTEN-SURG DRESSNG/SUTUR
76	6 V584	POSTSURG AFTERCARE NEC

		MEDICAL VISITS
APG	ICD-9	
	V655	PERSN W FEARED COMPLAINT
951	V670	SURGERY FOLLOW-UP
950	V681	ISSUE REPEAT PRESCRIPT
946	V700	ROUTINE MEDICAL EXAM
650	V702	GEN PSYCHIATRIC EXAM NEC
916	V723	GYNECOLOGIC EXAMINATION
961	V725	RADIOLOGICAL EXAM NEC
951	V762	SCREEN MAL NEOP-CERVIX
871	25000	DIABETES UNCOMPL ADULT
649	30000	ANXIETY STATE NOS
662	30390	ALCOH DEP NEC/NOS-UNSPEC
661	30590	DRUG ABUSE NEC-UNSPEC
754	36511	PRIM OPEN ANGLE GLAUCOMA
751	36610	SENILE CATARACT NOS
753	37300	BLEPHARITIS NOS
754	37515	TEAR FILM INSUFFIC NOS
772	38010	INFEC OTITIS EXTERNA NOS
773	38101	AC SEROUS OTITIS MEDIA
785	49390	ASTHMA W/O STATUS ASTHM
814	57420	CHOLELITHIASIS NOS
859	61171	MASTODYNIA
72	61610	VAGINITIS NOS
693	2 64413	THREAT LABOR NEC-ANTEPAR

		MEDICAL VISITS
APG	ICD-9	
694	64680	PREG COMPL NEC-UNSPEC
842	71590	OSTEOARTHROS NOS-UNSPEC
772	74400	EAR ANOM NOS/IMPAIR HEAR
784	78609	RESPIRATORY ABNORM NEC
631	85400	BRAIN INJURY NEC
949	V2509	CONTRACEPTIVE MANGMT NEC



#### OUTPATIENT RESOURCE COSTING SAMPLE HOSPITAL SAMPLE

Baptist Medical Center Dekalb Fort Payne, Alabama

Chandler Regional Hospital Chandler, Arizona

Mesa Lutheran Hospital Mesa, Arizona

Scottsdale Memorial Hospital Scottsdale, Arizona

Baptist Medical Center Little Rock, Arkansas

Kaiser Foundation Hospital Harbor City, California

Loma Linda University Medical Center Loma Linda, California

St. John's Hospital & Health Center Santa Monica, California

Presbyterian-Denver Hospital Denver, Colorado

Alachua General Hospital Gainesville, Florida

Indian River Memorial Hospital Vero Beach, Florida

" HCA Coliseum Medical Centers Macon, Georgia West Valley Medical Center Caldwell, Idaho

Ball Memorial Hospital Muncie; Indiana

Anne Arundel Medical Center Annapolis, Maryland

Quincy Hospital Ouincy, Massachusetts

Community Health Center Branch County Coldwater, Michigan

Bi-County Community Hospital , Warren, Michigan

Annapolis Hospital Wayne, Michigan

Bothwell Regional Health Center Sedalia, Missouri

Community Medical Center Toms River, New Jersey

Mountainside Hospital Montclair, New Jersey

Muhlenberg Regional Medical Center Plainfield, New Jersey

Millard Fillmore Hospitals Buffalo, New York Champlain Valley Physicians Hospital Medical Center Plattsburgh, New York

Christ Hospital Cincinnati, Ohio

Firelands Community Hospital Sandusky, Ohio

North Penn Hospital Lansdale, Pennsylvania

Northeastern Hospital of Philadelphia Philadelphia, Pennsylvania

Divine Providence Hospital Williamsport, Pennsylvania

Methodist Hospitals of Memphis Memphis, Tennessee

Providence Memorial Hospital El Paso, Texas

HCA Spring Branch Medical Center Houston, Texas

LDS Hospital Salt Lake City, Utah

Highline Community Hospital Seattle, Washington

#### OUTPATIENT RESOURCE COSTING STUDY AMBULATORY SURGERY CENTER SAMPLE

Scottsdale Memorial Hospital Surgery Center Scottsdale, Arizona

Fresno Surgery Center Fresno, California

Pomerado OP Surgical Center Poway, California

Santa Barbara Cottage Hospital Santa Barbara, California

Premier Ambulatory Surgery Center of San Diego San Diego, California

South Orange County OP Surgery Center San Clemente, California

Boulder Medical Center ASC Boulder, Colorado

Memorial Same Day Surgery Hollywood, Florida

New Port Richey Surgi-Center New Port Richey, Florida

Naples Day Surgery Naples, Florida

Tampa Medivision Eye Surgery 'Tampa, Florida Emory Clinic ASC Atlanta, Georgia

Marietta Surgical Center Marietta, Georgia

Ingalls Same Day Surgery Center Tinley Park, Illinois

Walk In & Out Surgery Center Somerset, Kentucky

Premier Ambulatory Surgery Center of Fort Wayne Fort Wayne, Indiana

Hand Surgery Associates Indianapolis, Indiana

South Bend Clinic Surgi-Center South Bend, Indiana

Surgi-Center of Baton Rouge Baton Rouge, Louisiana

Surgical Center of Greensboro Greensboro, North Carolina

Durham Ambulatory Surgery Center Durham, North Carolina

The Surgery Center / Cleveland Middleburg Heights, Ohio Allegheny OP Surgery Center Association Pittsburgh, Pennsylvania

Apple Hill Surgical Center York, Pennsylvania

Roper W. Ashley Surgery Center Charleston, South Carolina

Endoscopy Center Knoxville, Tennessee

De Haven Surgical Center Tyler, Texas

Bailey Square Surgical Center Austin, Texas

Medivision of Weslaco Weslaco, Texas

Baylor Surgicare Dallas, Texas

Surgicare Center Salt Lake City, Utah

Olympic Ambulatory Surgery Center Bremerton, Washington

#### OUTPATIENT RESOURCE COSTING STUDY MGMA PHYSICIAN OFFICE SAMPLE

The Family Clinic Little Rock, Arkansas

Southwestern Eye Center Mesa, Arizona

Mountain View Medical Clinic

Phoenix, Arizona

California Primary Physicians Medical Group Los Angeles, California

The Beaver Medical Clinic Redlands, California

Women's Medical Group of Santa Monica Santa Monica, California

L.A. Cardiology Los Angeles, California

Watson Clinic Lakeland, Florida

Doctors' Clinic Vero Beach, Florida

Piedmont Internal Medicine Associates Atlanta, Georgia

Caldwell Internal Medicine Caldwell, Idaho

Prince Georges Orthopaedic Associates Upper Marlboro, Maryland Opthalmic Consultants of Boston Boston, Massachusetts

Orthopaedic Surgery Specialists Royal Oak, Michigan

Oakwood Springwell Dearborn, Michigan

Mid America Cardiology Associates Kansas City, Missouri

Summit Medical Group Summit, New Jersey

Cincinnati Group Health Associates Cincinnati, Ohio

Tulsa Regional Medical Group Practice Tulsa, Oklahoma

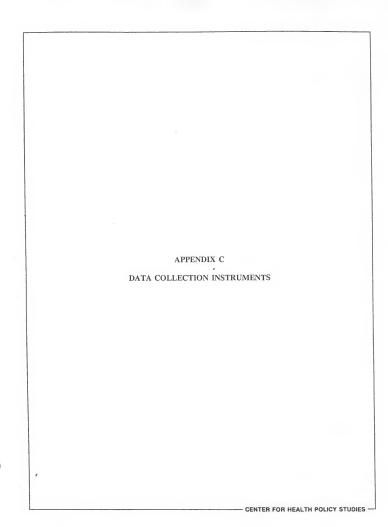
Belvedere Medical Corporation Carlisle, Pennsylvania

Lansdale Medical Group Lansdale, Pennsylvania

Philadelphia Health Services Philadelphia, Pennsylvania

Salt Lake Clinic Salt Lake City, Utah Summit Madison Medical Group Seattle, Washington

Southern West Virginia Clinic Beckley, West Virginia



## OUTPATIENT RESOURCE COSTING STUDY FACILITY PERSONNEL INTERVIEWED

Facility		

DEPARTMENT/CLINIC	NAME OF PERSON INTERVIEWED	TITLE OF PERSON INTERVIEWED	TELEPHONE NUMBER
Ambulatory Surgery Suite			
Main OR			
Endoscopy Suite			
Emergency Room			
Occupational Therapy			
Physical Therapy			
Speech/Hearing			
Cardiac Cath Lab			
Radiology			
Laboratory			
Other Dept			
Clinic			
Administration			
Finance			
Other			
Other			-

#### PURCHASING DEPARTMENT

TYPE OF ITEMS	PURCHASING GROUP/GROUPS	
Surgical Supplies:		
Medical Supplies:		
Surgical Equipment:		
Pharmaceuticals:		
Lab Equipment:		
Radiology Equipment:	y:	
	r:	
	<i>y</i> :	
splain the discount available to the facility	unit costs (may need to obtain from pharmacy).	
tplain the discount available to the facility	unit costs (may need to obtain from pharmacy).	

Facility	
Tacinity	

## CHECKLIST RESOURCE PROFILES AND RESOURCE LISTS

CLINIC/DEPARTMENT	PROFILES OBTAINED (√)	EQUIPMENT LIST UPDATED (1)	SUPPLY LIST UPDATED (/)	DRUG LIST UPDATED (/)
Amb, Surg. Suite				
Main OR		4		
Endoscopy				
ER				
Physical Therapy				
Occupational Ther.				
Speech/Hearing				
Cardiac Cath				
Radiology				
Laboratory				
Other Dept				
Clinic				

Equipment unit costs obtained from engineering/purchasing (check).  Supply unit costs obtained from purchasing (check).  Drug unit costs obtained from pharmacy/purchasing (check).  OR log obtained from outpatient surgery site(s) (check).
Square footage obtained from engineering (if necessary) (check).
Administration:
Medicare Cost Report (check).
Cost reports by department (check).
Listing of CPT codes by volume (check).
Charge Master (check).

#### OUTPATIENT SURGERY SITES

hone:
presentatives from the department indicate where they agre m with respect to each element of resource use (time, ugs, pathology, radiology and pre and post surgery testing be sure to emphasize the need for them to initial each ms given to each representative. For similar resources, i.e identification to ensure that unit costs can be derived from erry practice pattern difference unless it has cost

ili	:Department:		
	STAFFING		
	A. DIRECT (full time and part time) Instructions: Indicate with a check (*/) if the following per information is not available from the department, obtain from personnel are included in appropriate resource profiles. (G	om finance/accounting. Be sure that	
	STAFF TITLE/TYPE OF PERSONNEL	CHECK	
١	Physician Assistant (PA)		
Ì	Nurse Practitioner (NP)		
	Registered Nurse (RN)		
	Licensed Practical Nurse (LPN)		
	Certified Registered Nurse Anesthetist (CRNA)		
	Nurse Aide/Assistant		
	Technician		
	Medical Technician		
ĺ	Other		
į	Other		
	Other		
ĺ	Other		
	Other		
	Other		
	Other		

ility:	Department:
B. INDIRECT Instructions: Indicate the total num department. If the information is no	aber of FTEs who provide indirect (non-procedure) services in travailable from the department, obtain from finance/accounti
STAFF TITLE/TYPE OF PERSONNEL	NUMBER OF FTES
dministrator/Business Manager	
Secretary/Administrative Assistant	
Medical Secretary	
Medical Records Personnel	
Administrative/Business Office(s) Person	nel
Housekeeping	
daintenance	
Physician Assistant (PA)	
Nurse Practitioner (NP)	
Registered Nurse (RN)	
Licensed Practical Nurse (LPN)	
Nurse Aide	
Other	

Facility	: Department:			
	C. TURNAROUND TIME (time between consecutive patient cases)			
	What is the average turnaround time for each room (in minutes)?			
	Staff Time (minutes)			
	·			
	Does turnaround time vary by procedure/visit? If yes, describe. Indicate the procedures in which the clean-up time varies from the average. Indicate what the clean-up time is for those procedures.			
ш.	PRE-SURGICAL TESTING			
	Does the facility have a written policy on pre-surgical testing? If so, obtain a copy of the policy.  Check (\( \)) if policy was obtained			
IV.	HOURS OF OPERATION			
	Weekly hours of operation for department: hrs/wk Annual hours of operation for department: hrs/yr			
	What are the hours of the pre-op area?			
	What are the hours of the ORs?			

acilit	Department:
7.	VOLUME
	Annual inpatient procedures/visits:
	Annual outpatient procedures/visits:
	Average time per inpatient procedure/visit:
	Average time per outpatient procedure/visit:
	Annual patients:
	Fiscal year for volume statistics given:
	Beginning date: Month Day Year 19
	Ending date: Month Day Year 19
	Describe the department reviewed:
	Describe the department 1971977001
VI.	TIME
	Location of OR time data (i.e. OR log)
	Is log automated? Yes No
	Location of RR time data  Is log automated? Yes No
	Is log automated? Yes No
	If log is automated, obtain on diskette. If log is not automated, use OR log data collection form to
	record time data for appropriate procedures.
	1 Landau Francisco
	ANDRIAL CURRY ACCORD
	ANNUAL SUPPLY COSTS
VII.	
VII.	Cost of non-medical, non-surgical supplies (i.e. office supplies) \$
VII.	Cost of non-medical, non-surgical supplies (i.e. office supplies) \$  (Obtain from department expense report.)
VII.	Cost of non-medical, non-surgical supplies (i.e. office supplies) \$ (Obtain from department expense report.)
VII.	
VII.	

es per sites) If shared, 2 used for thi department

# ACCOUNTING/FINANCE DEPARTMENT

Facilit	y
I.	SALARY INFORMATION Instructions: Indicate the annual average salary for each type of personnel listed in site specific sections.
	Attach additional pages if necessary.

STAFF TITLE/TYPE OF PERSONNEL	AVERAGE ANNUAL SALARY PER FTE
Physician Assistant (PA)	
Nurse Practitioner (NP)	
Registered Murse (RM)	
Licensed Practical Nurse (LPN)	
Certified Registered Nurse Anesthetist (CRNA)	
Nurse Aide/Assistant	
Technician	
Medical Technician	
Medical Technologist	
Phlebotomist	
Histologist	
Respiratory Therapist	
Lab Technician	
Lab Technologist	
Lab Director	
Lab Clerical Staff	
Radiology Technician	
Radiology Director	
Radiology Clerical Staff	
Radiology Technician	
Radiology Clerical Staff	
Physical Therapist	
Physical Therapy Aide	
Physical Therapy Assistant	
Occupational Therapist	
Occupational Therapy Aide	
Speech Therapist	
Speech Therapy Aide	
Physical Therapy Aide	
Department Administrator/Business Manager	
Secretary/Administrative Assistant	

SALARY INFORMATION CONTINUED					
STAFF TITLE/TYPE OF PERSONNEL	AVERAGE ANNUAL SALARY PER FTE				
Medical Secretary					
Administrative/Business Office(s) Personnel					
Medical Records					
Kousekeeping					
Maintenance					
Other					

Umbulatory Surgery Suite		
	i,	
lain uk		
Endoscopy Suite		
ER		
Occupational Therapy		
Physical Therapy		
Speech/ Hearing		
Cardiac Cath		
Radiology		
Laboratory		
Other Department		
Other Department	•	
Other Department		
Other Department		
Clinic		
Clinic		

## - CENTER FOR HEALTH POLICY STUDIES -

Clinic Clinic Clinic

CLINIC/DEPARTMENT	ADMINISTRATIVE COST PER SITE	SQUARE FEET	HOURS USED PER WEEK	SPACE COSTS PER SQUARE FOOT
Ambulatory Surgery Suite	4			
Main OR				
Endoscopy Suite				
ER				
Occupational Therapy				
Physical Therapy				
Speech/Hearing				
Cardiac Cath				
Radiology				
Laboratory				
Other Department				
Clinic		-		
CUITE				

Clinic

v.	MAPPING OF REVENUE AND COST CENTERS
	Instructions: Questions should first be asked of the Finance Department, i.e., Controller, and may require assistance by Patient Accounting, the MIS department and individual department directors.
	<ul> <li>a) Determine revenue center codes applicable to the locations where APG procedures/services are performed.</li> </ul>
	<ul> <li>Determine the cost center codes applicable to the locations where APG procedures/services are performed.</li> </ul>
	<ul> <li>Determine the cross-walk between revenue center codes and cost center codes for all departments (outpatient surgery, medical departments, clinics, laboratory and radiology) reviewed.</li> </ul>
	Initial here after this information has been obtained
v.	COST REPORT
	Obtain a copy of the cost report for the facility for the most recent fiscal year. Obtain the Medicare cost report and departmental expense reports for the departments of interest.
	Initial here after cost report has been obtained  Initial here after departmental expense reports have been obtained
VI.	CHARGE MASTER
	Obtain a copy of the facility charge master (or applicable subset).
	Initial here after charge master has been obtained
VII.	PROCEDURE/VISIT VOLUME
	Obtain listing of procedure volumes by CPT code.
	Initial here after listing has been obtained
vm.	HMO VOLUME
	Determine the percentage of patients or visits that are HMO%  (Indicate whether number of patients or number of visits are used to determine percentage.)
	2) Determine the percentage of payments that are HMO or HMO related%

## OUTPATIENT RESOURCE COSTING STUDY GENERAL FACILITY INFORMATION

Instructions: This form is being used to collect data in hospitals, ambulatory surgery centers and physician offices. Therefore, some questions may not apply to every facility. For those questions that do apply, please provide information as completely and as accurately as possible.

FACILITY NAME:  FACILITY ADDRESS:  CONTACT PERSON:  DATE OF SITE VISIT:  CHPS DATA COLLECTOR(S):  PAYOR INPATIENT OUTPATIENT TOTAL  Medicare  Medicaid  Blue Cross  Commercial  Self-Pay  Other  Ownership: (circle) FOR-PROFIT NON-PROFIT  What is the age of the facility?					
CONTACT PERSON:  DATE OF SITE VISIT:  CHPS DATA COLLECTOR(S):  PAYOR INPATIENT OUTPATIENT TOTAL  Medicare  Medicaid  Blue Cross  Commercial  Self-Pay Other  Ownership: (circle) FOR-PROFIT NON-PROFIT  What is the age of the facility?	FACILITY NAME:				
DATE OF SITE VISIT:  CHPS DATA COLLECTOR(S):  Payor Mix (in dollars):  PAYOR INPATIENT OUTPATIENT TOTAL  Medicare  Medicaid  Blue Cross  Commercial  Self-Pay Other  Ownership: (circle) FOR-PROFIT NON-PROFIT  What is the age of the facility?	FACILITY ADDRESS:			2.	
CHPS DATA COLLECTOR(S):  Payor Mix (in dollars):  PAYOR INPATIENT OUTPATIENT TOTAL  Medicare  Medicaid  Blue Cross  Commercial  Self-Pay Other  Ownership: (circle) FOR-PROFIT NON-PROFIT  What is the age of the facility?	CONTACT PERSON:				
Payor Mix (in dollars):  PAYOR INPATIENT OUTPATIENT TOTAL  Medicare  Medicaid  Blue Cross  Commercial  Self-Pay Other  Ownership: (circle) FOR-PROFIT NON-PROFIT  What is the age of the facility?	DATE OF SITE VISIT:				
PAYOR INPATIENT OUTPATIENT TOTAL  Medicare  Medicaid  Blue Cross  Commercial  Self-Pay Other  Ownership: (circle) FOR-PROFIT NON-PROFIT  What is the age of the facility?	CHPS DATA COLLECTO	OR(S):			
Medicare  Medicaid  Blue Cross  Commercial  Self-Pay  Other  Ownership: (circle) FOR-PROFIT NON-PROFIT  What is the age of the facility?	Payor Mix (in dollars):				
Medicaid  Blue Cross  Commercial  Self-Pay Other  Ownership: (circle) FOR-PROFIT NON-PROFIT  What is the age of the facility?	PAYOR	INPATIENT	OUTPATIENT	TOTAL	
Blue Cross  Commercial  Self-Pay Other  Ownership: (circle) FOR-PROFIT NON-PROFIT  What is the age of the facility?	Medicare				
Commercial  Self-Pay Other  Ownership: (circle) FOR-PROFIT NON-PROFIT  What is the age of the facility?	Medicaid				
Commercial  Self-Pay Other  Ownership: (circle) FOR-PROFIT NON-PROFIT  What is the age of the facility?	Blue Cross				
Other  Ownership: (circle) FOR-PROFIT NON-PROFIT  What is the age of the facility?	Commercial		•		
Ownership: (circle) FOR-PROFIT NON-PROFIT  What is the age of the facility?	Self-Pay				
What is the age of the facility?	Other				
Is the facility considered by HCFA a "Rural Referral Hospital"? (yes/no)  Is the facility considered a "Sole Community Hospital"? (yes/no)  Bed Size: LICENSED OPERATING	What is the age of the facilit Location: (circle) URBAN	ty?	years		
Is the facility considered a "Sole Community Hospital"? (yes/no)  Bed Size: LICENSED OPERATING	For Hospitals:				
	Is the facility consi	dered a "Sole Co	ommunity Hospital*?	yes/no)	
Occupancy: % (% of operating)	Bed Size: LICENS	ED 01	PERATING		
	Occupancy:	% (% of opera	ating)		

dicate the number of residents by specialty:	
SPECIALTY	NUMBER OF RESIDENTS
Anesthesiology	
General Cardiology	
Pediatric Cardiology	
Dermatology	
Family Practice	
Gastroenterology	
Internal Medicine	
Emergency Medicine	
Neonatology	
Neurology	
Obstetrics/Gynecology	
Ophthalmology	
Otolaryngology (ENT)	
Pathology	
Pediatrics	
Physical Medicine and Rehabilitation	
Podiatry	
Psychiatry	
Radiology	
General Surgery	
Neurosurgery	
Orthopedic Surgery	
Plastic Surgery	

General Surgery Mix of Specialties Other	Primarily One Specialty (indicate)	
Mix of Specialties Other	General Surgery	
Other	16: 60 :1:	
the Main Operating Room with Inpatient Surgery  a Dedicated Outpatient OR Suite a Dedicated Endoscopy Suite (indicate location) Other (indicate)  ESCRIPTION OF EMERGENCY DEPARTMENT AND/OR TRAUMA CENTER: (please specify didelines used to determine level, i.e., American Hospital Association, state, etc.)  MERGENCY DEPARTMENT (check one): Level II Level III Level IIV RAUMA CENTER (check one): Level III Level III Level III UIDELINES USED:  One Specialty Offered Many Specialties Offered (indicate)  DESCRIPTION OF OCCUPATIONAL THERAPY SERVICES: Inpatient Only Outpatient Only	Other (indicate)	
a Dedicated Outpatient OR Suite a Dedicated Endoscopy Suite Minor Procedure Rooms		apply):
a Dedicated Outpatient OR Suite a Dedicated Endoscopy Suite Minor Procedure Rooms Other (indicate)  ESCRIPTION OF EMERGENCY DEPARTMENT AND/OR TRAUMA CENTER: (please specify idelines used to determine level, i.e., American Hospital Association, state, etc.)  MERGENCY DEPARTMENT (check one): Level II Level III Level IV  RAUMA CENTER (check one): Level II Level III Level III UIDELINES USED:  SESCRIPTION OF CLINICS: One Specialty Offered (indicate) Many Specialties Offered (indicate)  DESCRIPTION OF OCCUPATIONAL THERAPY SERVICES: Inpatient Only Outpatient Only DESCRIPTION OF PHYSICAL THERAPY SERVICES: Inpatient and Outpatient Offered DESCRIPTION OF PHYSICAL THERAPY SERVICES: Inpatient Only Outpatient Only	the Main Operating Room with Inpatient Surgery	
a Dedicated Endoscopy Suite  Minor Procedure Rooms  (indicate)  ESCRIPTION OF EMERGENCY DEPARTMENT AND/OR TRAUMA CENTER: (please specify indelines used to determine level, i.e., American Hospital Association, state, etc.)  MERGENCY DEPARTMENT (check one):  Level II  Level III  Level III  Level III  Level III  Level III  Level III  UIDELINES USED:  DESCRIPTION OF CLINICS:  One Specialty Offered  Many Specialties Offered (indicate)  DESCRIPTION OF OCCUPATIONAL THERAPY SERVICES:  Inpatient Only  Outpatient Only  Outpatient Only  DESCRIPTION OF PHYSICAL THERAPY SERVICES:  Inpatient Only  Outpatient Only	a Dedicated Outpatient OR Suite	
ESCRIPTION OF EMERGENCY DEPARTMENT AND/OR TRAUMA CENTER: (please specify idelines used to determine level, i.e., American Hospital Association, state, etc.)  MERGENCY DEPARTMENT (check one):  Level II  Level III  Level III  Level III  Level III  Level III  Level III  Secondary Offered (indicate)  Many Specialties Offered (indicate)  DESCRIPTION OF OCCUPATIONAL THERAPY SERVICES:  Inpatient Only  Outpatient Only	a Dedicated Endoscopy Suite	
ESCRIPTION OF EMERGENCY DEPARTMENT AND/OR TRAUMA CENTER: (please specify idelines used to determine level, i.e., American Hospital Association, state, etc.)  MERGENCY DEPARTMENT (check one):  Level II  Level III  Level III  Level III  Level III  Level III  Level III  Secondary Offered (indicate)  Many Specialties Offered (indicate)  DESCRIPTION OF OCCUPATIONAL THERAPY SERVICES:  Inpatient Only  Outpatient Only	Minor Procedure Rooms (indicate	location)
ESCRIPTION OF EMERGENCY DEPARTMENT AND/OR TRAUMA CENTER: (please specify idelines used to determine level, i.e., American Hospital Association, state, etc.)  MERGENCY DEPARTMENT (check one):  Level II  Level III  Level III  Level III  Level III  Level III  Level III  Secondary Offered (indicate)  Many Specialties Offered (indicate)  DESCRIPTION OF OCCUPATIONAL THERAPY SERVICES:  Inpatient Only  Outpatient Only	Other(indicate)	,
Level IV  RAUMA CENTER (check one):	idelines used to determine level, i.e., American Hospital Associ  MERGENCY DEPARTMENT (check one):  Level II  Level II	
Level I Level II Level III Level III  UIDELINES USED:  One Specialty Offered (indicate)  Many Specialties Offered (indicate)  Many Specialties Offered (indicate)  DESCRIPTION OF OCCUPATIONAL THERAPY SERVICES:  Inpatient Only Outpatient Only Inpatient and Outpatient Offered  DESCRIPTION OF PHYSICAL THERAPY SERVICES:  Inpatient Only Outpatient Only	Level IV	
Level I Level II Level III Level III  UIDELINES USED:  One Specialty Offered (indicate)  Many Specialties Offered (indicate)  Many Specialties Offered (indicate)  DESCRIPTION OF OCCUPATIONAL THERAPY SERVICES:  Inpatient Only Outpatient Only Inpatient and Outpatient Offered  DESCRIPTION OF PHYSICAL THERAPY SERVICES:  Inpatient Only Outpatient Only		
Level II Level III Level III  UIDELINES USED:  One Specialty Offered (indicate)  Many Specialties Offered (indicate)  DESCRIPTION OF OCCUPATIONAL THERAPY SERVICES:  Inpatient Only Outpatient Only DESCRIPTION OF PHYSICAL THERAPY SERVICES:  Inpatient only DESCRIPTION OF PHYSICAL THERAPY SERVICES:  Inpatient Only Outpatient Only		
Level III  UIDELINES USED:  SESCRIPTION OF CLINICS:  One Specialty Offered	Level I	
Level III  UIDELINES USED:  SESCRIPTION OF CLINICS:  One Specialty Offered	Level II	
One Specialty Offered (indicate)  Many Specialties Offered (indicate)  DESCRIPTION OF OCCUPATIONAL THERAPY SERVICES:  Inpatient Only Outpatient Only Inpatient and Outpatient Offered  DESCRIPTION OF PHYSICAL THERAPY SERVICES:  Inpatient Only OUTPATION OF PHYSICAL THERAPY SERVICES:  Inpatient Only Outpatient Only Outpatient Only Outpatient Only	Level III	
One Specialty Offered (indicate)  Many Specialties Offered (indicate)  DESCRIPTION OF OCCUPATIONAL THERAPY SERVICES:  Inpatient Only Outpatient Only Inpatient and Outpatient Offered DESCRIPTION OF PHYSICAL THERAPY SERVICES:  Inpatient Only Outpatient Only Outpatient Only Outpatient Only Outpatient Only Outpatient Only Outpatient Only	UIDELINES USED:	
Many Specialties Offered (indicate)  DESCRIPTION OF OCCUPATIONAL THERAPY SERVICES:  Inpatient Only Outpatient Only DESCRIPTION OF PHYSICAL THERAPY SERVICES:  Inpatient Only Outpatient Only Outpatient Only Outpatient Only	ESCRIPTION OF CLINICS:	
Many Specialties Offered (indicate)  DESCRIPTION OF OCCUPATIONAL THERAPY SERVICES:  Inpatient Only Outpatient Only DESCRIPTION OF PHYSICAL THERAPY SERVICES:  Inpatient Only Outpatient Only Outpatient Only Outpatient Only	One Specialty Offered (indice	te)
DESCRIPTION OF OCCUPATIONAL THERAPY SERVICES:  Inpatient Only Outpatient Only Inpatient and Outpatient Offered DESCRIPTION OF PHYSICAL THERAPY SERVICES: Inpatient Only Outpatient Only Outpatient Only	Many Specialties Offered (indicate)	,
Inpatient Only Outpatient Only Inpatient and Outpatient Offered DESCRIPTION OF PHYSICAL THERAPY SERVICES: Inpatient Only Outpatient Only		
Inpatient Only Outpatient Only Inpatient and Outpatient Offered DESCRIPTION OF PHYSICAL THERAPY SERVICES: Inpatient Only Outpatient Only		
Outpatient Only Inpatient and Outpatient Offered DESCRIPTION OF PHYSICAL THERAPY SERVICES: Inpatient Only Outpatient Only Outpatient Only	ESCRIPTION OF OCCUPATIONAL THERAPY SERVICES:	
Outpatient Only Inpatient and Outpatient Offered DESCRIPTION OF PHYSICAL THERAPY SERVICES: Inpatient Only Outpatient Only Outpatient Only	Inpatient Only	
Inpatient and Outpatient Offered DESCRIPTION OF PHYSICAL THERAPY SERVICES: Inpatient Only Outpatient Only	Outpatient Only	
DESCRIPTION OF PHYSICAL THERAPY SERVICES:  Inpatient Only Outpatient Only	Inpatient and Outpatient Offered	
Inpatient Only Outpatient Only	-	
Outpatient Only	ECCDIDITION OF DUVSICAL THED ADV SERVICES.	
Outpatient Only		
Inpatient and Outpatient Offered	Inpatient Only	
	Inpatient Only Outpatient Only	
	Inpatient Only Outpatient Only	

DESCRIPTION OF SPEECH AND HEARING SERVICES:
Inpatient Only
Outpatient Only
Inpatient and Outpatient Offered
DESCRIPTION OF CARDIAC CATHETERIZATION LABORATORY SERVICES
Inpatient Only
Outpatient Only
Inpatient and Outpatient Offered
DESCRIPTION OF LABORATORY SERVICES:
Full Service Laboratory
Blood Draw Station Only
All Laboratory Services are Performed Elsewhere
Other (indicate)
DESCRIPTION OF RADIOLOGY SERVICES:
Full Radiology Department
Limited Services (indicate) All Radiology Services are Performed Elsewhere
All Radiology Services are Performed Elsewhere
Other (indicate)
DESCRIPTION OF PULMONARY SERVICES:
Inpatient Only
Outpatient Only
Inpatient and Outpatient Offered
DESCRIPTION OF EEG SERVICES:
Inpatient Only
Outpatient Only
Inpatient and Outpatient Offered

## CLINIC INFORMATION:

Indicate with a (v') the specialties offered. If available, obtain clinic volume (# of visits per year). Attach additional pages if necessary.

SPECIALTY	CLINIC OFFERED (V)	CLINIC VOLUME (visits per yr)
Cardiology		
Dermatology		
Family Practice		
Gastroenterology		
General/Internal Medicine		
Neurology		
Obstetrics/Gynecology		
Ophthalmology		
Otolaryngology (ENT)		
Pediatrics		
Podiatry		
Psychiatry		
Surgery		
Orthopedic Surgery		
Plastic Surgery		
Urology		
Other		
TOTAL		

## OTHER NON-SURGICAL/NON-CLINIC SITES

Facility: Department: Director/Contact Person: Phone: Phone:

I. VALIDATE RESOURCE PROFILES

For each applicable procedure/visit, have representatives from the department indicate where they agree or disagree on each resource use profile form with respect to each element of resource use (time, staffing, supplies, equipment, anesthesia, drugs, pathology, radiology and pre and post surgery testing). Provide them with a set of instructions and be sure to emphasize the need for them to initial each profile reviewed. Keep track of profile forms given to each representative. For similar resources, i.e., small supply items, we simply need enough identification to ensure that unit costs can be derived from purchasing. It is not essential to capture every practice pattern difference unless it has cost implications.
After you have validated all resource profiles for the department, initial here:
,

y:	Department:	
STAFFING		
Instructions: Indi information is not	time and part time) cate with a check (V) if the following personn available from the department, obtain from fi uded in appropriate resource profiles. (Group	nance/accounting. Be sure the
STAFF TITLE/TYPE	DF PERSONNEL	CHECK
Nurse Aide/Assist	ent	
Technician		
Medical Technoian		
Medical Technolog	ist	
Phlebotomist		
Histologist		
Respiratory Thera	pist	
Lab Technician		
Lab Technologist		
Radiology Technic	ian	
Physical Therapis	t	
Physical Therapy	Aide	
Physical Therapy	Assistant	
Occupational Ther	apist	
Occupational Ther	apy Aide	
Speech Therapist		
Speech Therapy Ai	de	
Other		

Other

B. INDIRECT	
Instructions: Indicate the total number of FTEs who provi- department. If the information is not available from the dep	de indirect (non-procedure) services in partment, obtain from finance/accounti
STAFF TITLE/TYPE OF PERSONNEL	NUMBER OF FTES
Administrator/Business Manager	
Secretary/Administrative Assistant	
Medical Secretary	
Medical Records Personnel	
Administrative/Business Office(s) Personnel	
Housekeeping	
Maintenance	
Physician Assistant (PA)	
Nurse Practitioner (NP)	
Registered Nurse (RN)	
Licensed Practical Nurse (LPN)	
Nurse Aide	
Lab Director	
Lab Technician	
Lab Clerical Staff	
Radiology Director	
Radiology Technician	
Radiology Clerical Staff	
Physical Therapist	
Physical Therapy Aide	
Physical Therapy Assistant	
Occupational Therapist	
Speech Therapist	
Other	

lity:	Department:
. но	URS OF OPERATION
	kly hours of operation for department: hrs/wk ual hours of operation for department: hrs/yr
VOI	LUME
Ann Aver Aver Ann Fisca Begi Endi	ual inpatient procedures/visits:  ual outpatient procedures/visits:  rage time per inpatient procedure/visit:  rage time per outpatient procedure/visit:  ual patients:  al year for volume statistics given:  inning date: Month Day Year 19  ing date: Month Day Year 19  cribe the department reviewed:
_	
_	•
ANI	NUAL SUPPLY COSTS
Cost	t of non-medical, non-surgical supplies (i.e. office supplies) \$

Facility:	Department:
VI. MOVABLE EQUIPMENT	

Name of Equipment	Purchase Price (if purchased in last 2 years)	Date of purchase	Useful Life (in years)	# of procedures per yr (all sites)	If shared, % used for this department
	*				
			-		

## PHYSICIAN OFFICES/CLINICS

Facility:	Clinic:
Director/Contact Person:	Phone:
Completed by (initials):	

## I. VALIDATE RESOURCE PROFILES

For each applicable procedure/visit, have representatives from the clinic indicate where they agree or disagree on each resource use profile form with respect to each element of resource use (time, staffing, supplies, equipment, anesthesia, drugs, pathology, radiology and pre and post surgery testing). Provide them with a set of instructions and be sure to emphasize the need for them to initial each profile reviewed. Keep track of profile forms given to each representative. For similar resources, i.e., small supply items, we simply need enough identification to ensure that unit costs can be derived from purchasing. It is not essential to capture every practice pattern difference unless it has cost implications.

After you have validated all resource profiles for the clinic, initial here:

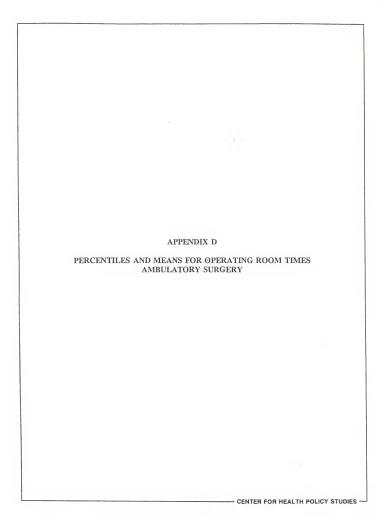
A. DIRECT (full time and part time) Instructions: Indicate with a check (V) if the followin information is not available from the clinic, obtain from	
personnel are included in appropriate resource profiles	. (Group or classify personnel when
STAFF TITLE/TYPE OF PERSONNEL	CHECK
Physician Assistant (PA)	
Nurse Practitioner (NP)	
Registered Nurse (RN)	
Licensed Practical Nurse (LPN)	
Nurse Aide/Assistant	
Technician	
Medical Technician	
Other	

Facility: \_\_\_\_\_ Clinic: \_\_\_\_

B. INDIRECT		
Instructions: Indic	ate the total number of FTEs who provid	e indirect (non-procedure) services in t
clinic. If the inform	nation is not available from the clinic, ob	tain from finance/accounting.
	T	
STAFF TITLE/TYPE OF PERSO		NUMBER OF FTES
Administrator/Business Ma	nager	
Secretary/Administrative		
Medical Secretary		
Medical Records Personne		
Administrative/Business	Office(s) Personnel	
Housekeeping		
Maintenance		
Physician Assistant (PA)		
Nurse Practitioner (NP)		
Registered Nurse (RN)		
Licensed Practical Nurse	(LPN)	-
Nurse Aide		
Other		

Facility	Clinic:
	C. TURNAROUND TIME (time between consecutive patient cases)
	What is the average turnaround time for each room (in minutes)?
	Indicate the staff (by type, i.e. RN, LPN, Tech) that prepare the room between cases and the amount of time spent by each:
	Staff Time (minutes)
	Does turnaround time vary by procedure/visit? If yes, describe. Indicate the procedures in which the clean-up time varies from the average. Indicate what the clean-up time is for those procedures.
II.	HOURS OF OPERATION  Weekly hours of operation for clinic:hrs/wk
īV.	Annual hours of operation for clinic:hrs/yr  VOLUME
٧.	Annual procedures/visits: Annual patients:
	Fiscal year for volume statistics given:
	Beginning date: Month Day Year 19 Ending date: Month Day Year 19
	Describe the clinic reviewed:
v.	ANNUAL SUPPLY COSTS

	Clinic				
MOVABLE EQU	JIPMENT				
Name of Equipment	Purchase Price (if purchased in last 2 years)	Date of purchase	Useful Life (in years)	# of procedures per yr (all sites)	If shared, a used for the clinic
		-			
	<del> </del>				
					-
					-
		-			<del>                                     </del>



		MEAN, MEDIAN, & STANDARD DEVIATION FOR PROCEDUR		Hospitals			A.S.C.s	
				Hoopitois	Standard			Standard
SURGICAL		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
PROCEDURES		SUPERFICIAL NEEDLE BIOPSY & ASPIRATION	ividan	mount				
APG#	2		21.50	15.00	14.35	17.00	15.00	4.4
CPT CODE		Puncture Aspiration of Cyst of Breast	53.33	60.00	18.89	39.00	45.00	12.2
CPT CODE		Biopsy of breast, needle (separate procedure)	45.00	45.00	21.21	60.00	60.00	N.A.
CPT CODE		Biopsy, thyroid, percutaneous needle	40.00	40.00	21.21	00.00	00.00	
APG#	3	SIMPLE INCISION & DRAINAGE	30.00	27.00	5.81	30.71	27.00	6.34
CPT CODE		Incision and drainage of infected or noninfected sebaceous cyst	33.32	30.00	11.95	27.60	27.00	1,26
CPT CODE		Incision and drainage of abscess (e.g., carbuncle)	31.76	30.00	4.98	32.53	30.00	9.8
CPT CODE		Incision & removal of foreign body subcutaneous tissues; simple	31./0	30.00	4.56	32.03	30.00	3.0
APG#	4	COMPLEX INCISION AND DRAINAGE	F0.00	50.00	4.14	50.91	50.00	8.31
CPT CODE		Incision and drainage of hematoma; complicated	52.00	50.00	14.47	49,44	50.00	10.14
CPT CODE		Incision and drainage, complex, post-operative wound infection	56.67			49.00	50.00	5.48
CPT CODE	23931	Incision and drainage, upper arm or elbow area; infected bur	52.73	50.00	6.47			
CPT CODE		Deep dissection below fascia, for deep infection of foot, with(out) tendon sheath involvement; s	44.00	35.00	12.65	42.50	37.50	11.90
APG#		COMPLEX INCISION AND DRAINAGE			0.47	04.07	20.00	4.08
CPT CODE		Debridement of nails, manual; five or less	24.29	20.00	9.17	21.67	20.00	
CPT CODE	11701	Debridement of nails, manual each additional; five or less	30.67	30.00	11.47	28.67	30.00	7.12
APG#	6	SIMPLE DEBRIDEMENT & DESTRUCTION			-			
CPT CODE	11040	Debridement of skin, partial thickness	36.43	30.00	11.34	38.00	30.00	12.53
CPT CODE	11730	Avulstion of nail plate, partial or complete, simple; single	25.31	20.00	12.04	23.50	20.00	6.69
CPT CODE	17000	Destruction by any method, with or without surgical curettement	36.50	35.00	4.74	53.33	35.00	41.68
CPT CODE	20670	Removal of implant superficial, (e.g., buried wire, pin or rod	52.41	50.00	5.71	45.60	50.00	10.51
APG#	7	SIMPLE EXCISION & BIOPSY						
CPT CODE	11401	Excision, benign lesion, except skin tag, trunk, arms or leg	31.25	30.00	6.12	34.15	30.00	8.8
CPT CODE	11440	Excision, other benign lesion (unless listed elsewhere); face, ears, eyelids, nose, lips, mucous m	37.88	35.00	11.76	38.25	35.00	10.1
CPT CODE		Excision, malignant lesion; trunk, arms or legs; lesion diameter .6 - 1.0 cm	34.80	30.00	11.59	33.83	30.00	9.5
CPT CODE		Excision, malignant lesion, face, ears, eyelids, nose, lips;	38.27	35.00	12.88	40.80	35.00	10.6
APG#	8	COMPLEX EXCISION, BIOPSY & DEBRIDEMENT						
CPT CODE		Excision, benign lesion, except skin tag (unless listed else	33.53	30.00	8.43	35.78	30.00	10.3
CPT CODE		Excision, benign lesion, except skin tag (unless listed else	33.89	30.00	9.79	39.95	30.00	15.7
CPT CODE		Excision, malignant, lesion, face, ears, eyelids, nose, lips	39.81	35.00	15.21	42.92	35.00	11.7
APG#	9	LIPECTOMY & EXCISION WITH RECONSTRUCTION					1	
CPT CODE		Excision, excessive skin and subcutaneous tissue	65.00	60.00	11.68	68.33	60.00	13.2
CPT CODE		Excision, leg pressure ulcer, with local skin flap(s)	92.31	90.00	8.32	83.75	90.00	12.5
CPT CODE	27726	Ligation and division and completion of strip. of long or short saphenous veins with radical excis	114.44	120.00	20.68	120.00	120.00	
APG#	10	SIMPLE SKIN REPAIR					1	
		Simple repair of superficial wounds of scalp, neck, axillae	32.86	30.00	7.68	30.00	30.00	-
CPT CODE	12001	Simple repair of superficial wounds of scalp, neck, axillae,	37.10	30.00	10.80	36,71	30.00	12.4
CPT CODE	12002	Layer closure of wounds of scalp axillae, trunk and/or extremities (excluding hands and feet); 2.	40.57	45.00	11.23	44.57	45.00	13.4
CPT CODE			40.01	10100	11120			
APG#	11	COMPLEX SKIN REPAIR Simple repair or superficial wounds of face, ears, eyelids,	35.38	35.00	3.20	35.00	35.00	-
CPT CODE			49.62	45.00	14.36	45.40	45.00	
CPT CODE	12017	Simple repair or superficial wounds of face, ears, eyelids,	65.00	60.00	36.06	45.50	45.00	13.7
CPT CODE		Layer closure of wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.5cm or l	81,92	75.00	17.97	78.00	75.00	. 25.2
CPT CODE		Blepharoplasty, upper eyelid	01.92	/5.00	17.97	, 8.00	,5.00	20.2
APG#	12	SKIN & INTEGUMENT GRAFT, TRANSFER & REARRANGEMENT	77.21	75,00	5.63	80.00	75.00	16.8
CPT CODE	14060	Adjacent tissue transfer or rearrangement, eyelids, nose, ears and/or lips; defect 10 sq. cm or le	77.31		26.19	88.36	65.00	66.0
CPT CODE	116100	Split graft, trunk, scalp, arms, legs, hands, and/or feet; 1	90.13	90.00	26.19	08.30	05.00	1 00

	MEAN, MEDIAN, & STANDARD DEVIATION FOR PROCEDUR		Hospitals				
				Standard			Standar
SURGICAL	APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
PROCEDURES	15260 Full thickness graft, free, including direct closure of donor	105.71	105.00	4.32	97.78	105.00	12.2
CPT CODE	27 SIMPLE INCISION & EXCISION OF BREAST						
APG#	19101 Biopsy of breast, incisional	50.79	50.00	7.44	49.25	50.00	6.6
CPT CODE	19101 Biopsy of breast, incisional 19120 Excision or cyst, fibroadenoma, or other benign or malignant	60.65	60.00	11.24	55.22	60.00	8.7
CPT CODE							
APG#	28 BREAST RECONSTRUCTION & MASTECTOMY 19140 Mastectomy for gynecomastia through circular or other incision	77.00	70.00	19.86	66.58	70.00	11.6
CPT CODE		88,44	82.50	37.67	73.80	75.00	28.4
CPT CODE	19160 Mastectomy, partial	68.07	60.00	18,68	97.86	75.00	62.9
CPT CODE	19182 Mastectomy, subcutaneous						
APG#	53 OCCUPATIONAL THERAPY	42.94	30.00	23.15	N.A.	N.A.	N.A.
CPT CODE	97540 Training in activities of daily living (self care skills and	23.33	15.00	16,19	N.A.	N.A.	N.A.
CPT CODE	97541 Training in activities of daily living (self care skills and	20.00	10100				
APG#	54 PHYSICAL THERAPY	26.20	20.00	7.43	N.A.	N.A.	N.A.
CPT CODE	97010 Physical medicine treatment to one area hot or cold packs	21.56	20.00	10,44	N.A.	N.A.	N.A.
CPT CODE	97128 Physical medicine treatment to one area, initial 30 minutes,	21.00	20.00	10.14	14.5.11		
APG#	55 DIAGNOSTIC ARTHROSCOPY	77.50	70.00	36.01	63.93	60.00	22.2
CPT CODE	29815 Arthroscopy, shoulder, diagnostic, with(out) synovial biopsy (separate procedure)	57.89	60.00		64,41	60.00	26.1
CPT CODE	29870 Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)	37.03	00.00	10.11	01111		
APG#	56 THERAPEUTIC ARTHROSCOPY	63.62	60.00	12,41	68.81	60.00	22.3
CPT CODE	29877 Arthroscopy, knee, surgical debridement/shaving of cartilage (chondroplasty)	75.27	60.00	30.39	80.18	75.00	24.2
CPT CODE	29881 Arthroscopy, knee, surgical with meniscectomy (medical or lateral including any meniscal shavin	75.27	00.00	30.33	00.10	70.00	2.412
APG#	57 REPLACEMENT OF CAST	32.69	30.00	9.71	28.00	30.00	4.4
CPT CODE	29075 Application elbow to finger (short arm)	33.13	30.00	11.00	28.00	30.00	4.4
CPT CODE	29405 Application	33.13	30.00	11.00	20.00	30.00	7,7
APG#	58 SPLINT, STRAPPING & CAST REMOVAL	33.57	30.00	17.48	28.33	30.00	4.0
CPT CODE	29125 Application of short arm splint (forearm to hand); static	21.67	20.00	7.64	N.A.	N.A.	N.A.
CPT CODE	29580 Strapping unna boot	21.67	20.00	7.04	N.A.	IV.A.	14.0.
APG#	59 TREATMENT OF CLOSED FRACTURE & DISLOCATION OF FINGER, TOE & RIB	00.50	00.00	16,05	N.A.	N.A.	N.A.
CPT CODE	21800 Treatment of rib fracture, closed, uncomplicated, each	32.50	30.00		27.14	25.00	3.9
CPT CODE	26720 Treatment of closed phalangeal shaft fracture, proximal or m	30.00	25.00	7.32	27.14	25.00	3.8
APG#	60 TREATMENT OF CLOSED FRACTURE & DISLOCATION EXCEPT FINGER, TOE & RIB						12.4
CPT CODE	25600 Treatment of closed distal radial fracture (e.g., Colles or Smith type) or epiphyseal separation, w	43.27	43.00	8.60	40.29	43.00	
CPT CODE	25605 Treatment of closed distal radial fracture (e.g., Colles or Smith type) or epiphyseal separation, w	34.67	30.00	8.96	32.50	30.00	
CPT CODE	28470 Treatment of closed metatarsal fracture without manipulation	32.00	30.00	12.74	29.00	30.00	10.2
APG#	62 TREATMENT OF OPEN FRACTURE & DISLOCATION EXCEPT FACE						-
CPT CODE	25615 Treatment of open distal radial fracture (e.g., Colles or Smith	96.15	90.00	27.01	90.00	90.00	
CPT CODE	25620 Open treatment of closed or open distal radial fracture (e.g.,	88.67	30.00		91.33	30.00	
CPT CODE	26735 Open treatment of closed or open phalangeal shaft fracture	83.44	30.00	12.21	87.37	30.00	8.1
APG#	63 JOINT MANIPULATION UNDER ANESTHESIA						1
CPT CODE	23700 Manipulation under anesthesia, shoulder joint, including app	31.25	30.00		32.93	30.00	
CPT CODE	27570 Manipulation of knee joint under general anesthesia (include	32.31	30.00	8.32	36.36	30.00	18.0
APG#	64 SIMPLE MAXILLOFACIAL PROCEDURES						
CPT CODE	30000 Drainage of hematoma, nasal, internal approach	40.83	30.00	9.73	35.00	35.00	-
CPT CODE	30110 Excision, nasal polyp(s), simple unilateral	51.43	30.00	19.56	47.14	45.00	. 19.7
CPT CODE	30111 Excision, nasal polyp(s), simple bilateral	60.36	30.00		47.50	45.00	6.1
CPT CODE	31020 Sinusotomy, maxillary (antrotomy); intranasal, unilateral	72.92	60.00	29.68	81.50	73.00	36.8
APG#	65 COMPLEX MAXILLOFACIAL PROCEDURES						

Hospitals

55.83

60.00

N.A.

N.A.

N.A.

32000 Thoracentesis, puncture or pleural cavity for aspiration, in 32405 Biopsy, lung or mediastinum, percutaneous needle

81 SIMPLE ENDOSCOPY OF THE UPPER AIRWAY

MEAN, MEDIAN, & STANDARD DEVIATION FOR PROCEDURE O.R. TIMES

CPT CODE

APG#

				Hospitals			A.S.C.s	
SURGICAL					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviatio
CPT CODE	36497	Removal of implantable intravenous infusion pump or venous a	49.55	60.00	14.05	55.00	45.00	39.0
APG#		MINOR VASCULAR REPAIR & FISTULA CONSTRUCTION						
CPT CODE		Thrombectomy and/or repair of arterial or venous graft	74.50	62.50	28.20	75.00	75.00	N.A.
CPT CODE		Insertion of implantable intravenous infusion pump or venous	55.00	45.00	15.70	80.00	45.00	78.6
APG#	115	SECONDARY VARICOSE VEINS & VASCULAR INJECTION						
CPT CODE		Ligation, division, and/or excision of secondary varicose veins (clusters), one leg	91.00	96.00	15.87	92.55	96.00	21.3
CPT CODE		Unlisted procedure, vascular surgery	N.A.	N.A.	N.A.	44.00	44.00	N.A.
APG#		VASCULAR LIGATION						
CPT CODE		Ligation, major artery (e.g., post-traumatic, rupture); extremity	70.90	58.00	23.69	N.A.	N.A.	N.A.
CPT CODE	27650	Interrupting, partial or complete, or femoral vein, by ligature, intravascular device	85.10	60.00	44.01	N.A.	N.A.	N.A.
CPT CODE	27720	Ligation and division and complete stripping of long or short saphenous veins	76.50	60,00	28.16	69.17	60.00	27.12
APG#	117	CARDIOPULMONARY RESUSCITATION & INTUSATION						
CPT CODE		Intubation, endotracheal, emergency procedure	25.00	15.00	28.72	15.00	15.00	
CPT CODE		Cardiopulmonary resuscitation (e.g., in cardiac arrest)	104.50	90.00	55.40	N.A.	N.A.	N.A.
APG#	131	CHEMOTHERAPY BY INFUSION						
CPT CODE		Chemotherapy injection, intravenous, single premixed agent,	167.50	120.00	158.61	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy injection, intravenous, complex, using 1 or more	236.43	180.00	168.24	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy inject, iv, complex, using 1 or more agents req.	202.50	210.00	113.25	N.A.	N.A.	N.A.
APG#	132	CHEMOTHERAPY EXCEPT 8Y INFUSION						
CPT CODE		Chemotherapy injection, intravenous, single premixed agent,	65.00	50.00	43.11	N.A.	N.A.	N.A.
CPT CODE		Unlisted chemotherapy procedure	30.00	30.00	N.A.	N.A.	N.A.	N.A.
APG#	133							
CPT CODE		Transfusion, blood or blood components	67.14	60.00	37.73	120.00	120.00	N.A.
CPT CODE		Push transfusion, blood, 2 years or under	60.00	60.00	-	N.A.	N.A.	N.A.
APG#	134	BLOOD & BLOOD PRODUCT EXCHANGE						
CPT CODE		Exchange transfusion, blood, other than newborn	60.00	60.00	N.A.	N.A.	N.A.	N.A.
CPT CODE		Therapeutic apheresis (plasma and/or cell exchange)	193.33	180.00	160.42	N.A.	N.A.	N.A.
APG#		DEEP LYMPH STRUCTURE & THYROID PROCEDURES						
CPT CODE		Biopsy or excision of lymph node(s); deep cervical node(s)	55.00	50.00	10.33	56.33	50.00	14.5
CPT CODE		Biopsy or excision of lymph node(s); deep axillary node(s)	60.00	55.00	24.22	67.91	60.00	21.79
APG#		ESOPHAGEAL DILATION WITHOUT ENDOSCOPY						
CPT CODE		Dilation of esophagus, by unguided sound or bougle, single o	29.35	30.00	5.50	39.00	30.00	19.4
CPT CODE		Dilation of esophagus, by unguided sound or bougie, single o	28.33	30.00	4.50	32.50	30.00	8.6
APG#	159	PERCUTANEOUS & OTHER SIMPLE GASTROINTESTINAL BIOPSY						
CPT CODE		Biopsy of liver, percutaneous needle	46.67	45.00	29.90	47.50	47.50	17.6
CPT CODE		Biopsy, abdominal or retroperitoneal mass, percutaneous needle	44.17	35.00	23.33	92.50	92.50	45.9
CPT CODE	91000	Esophageal intubation and collection of washings for cytology, including preparation of specime	112.50	112.50	10.61	N.A.	N.A.	N.A.
APG#	160	ANOSCOPY WITH BIOPSY & DIAGNOSTIC PROCTOSIGMOIDOSCOPY						
CPT CODE		Proctosigmoidoscopy diagnostic (separate procedure)	21.00	25.00	3.16	22.50	25.00	5.0
CPT CODE		Sigmoidoscopy, flexible fiberoptic diagnostic	28.32	30.00	9.78	29.08	30.00	5.00
CPT CODE		Anoscopy for removal of polyp	30.00	25.00	14.77	30.00	25.00	8.60
APG#	161	PROCTOSIGMOIDOSCOPY WITH EXCISION OR BIOPSY						
CPT CODE		Sigmoidoscopy, flexible fiberoptic for biopsy and/or collect	26.91	25.00	9.86	25.50	26.50	. 7.74
CPT CODE		Sigmoidoscopy, flexible fiberoptic for removal of polypoid I	33.70	30.00	8.29	35.00	40.00	, 10.69
APG#	162	DIAGNOSTIC UPPER GASTROINTESTINAL ENDOSCOPY						
CPT CODE		Upper GI endoscopy including esophagus, stomach and either d	33.75	32.50	5.76	30.42	30.00	8.38

SURGICAL PROCEDURES CPT CODE APG#							
PROCEDURES CPT CODE APG#				Standard			Standar
CPT CODE APG#	APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviatio
APG#	43239 Upper GI endoscopy incl. esophagus etc. for biopsy and/or collection of specimen by brushing o	38.07	45.00	10.08	36.08	30.00	13.0
	163 THERAPEUTIC UPPER GASTROINTESTINAL ENDOSCOPY						
	43245 Upper GI endoscopy including esophagus etc. for dilation of	35.92	32.00	10.10	40.00	45.00	15.4
CPT CODE	43245 Upper Gl endoscopy including esophagus etc. for directed placement of percutaneous gastrosto	36,07	30.00	11.12	35.00	30.00	7.0
APG#	164 DIAGNOSTIC LOWER GASTROINTESTINAL ENDOSCOPY						
CPT CODE	45378 Colonoscopy, fiberoptic, beyond splenic flexure; diagnostic	50,11	45.00	22.21	35.92	30.00	13.5
CPT CODE	45380 Colonoscopy, fiberoptic, beyond splenic flexure; for biopsy	60.19	60.00	20.78	44.36	42.50	14.1
	165 THERAPEUTIC LOWER GASTROINTESTINAL ENDOSCOPY						
APG#	45383 Colonoscopy, fiberoptic, beyond splenic flexure; for ablation of tumor or mucosal lesion	65.42	60.00	21.58	44.38	42.50	13.2
CPT CODE	45385 Colonoscopy, fiberoptic, beyond splenic flexure; for removal of polypoid lesion(s)	61.24	60.00	16.41	47.27	45.00	17.0
CPT CODE	166 ERCP & OTHER MISC. GASTROINTESTINAL ENDOSCOPY PROCEDURES						
APG#	43260 Endoscopic retrograde cholangiopan-creatography w/ or w/o bi	75.00	60.00	22,91	N.A.	N.A.	N.A.
CPT CODE	44360 Small intestinal endoscopy beyond second portion of duodenum	45.00	45,00	15.00	46.67	45.00	2.8
CPT CODE		10100					
APG#	167 TONSIL & ADENOID PROCEDURES  42821 Tonsillectomy and adenoidectomy, age 12 or over	60.62	60,00	6.78	58.29	60.00	10.3
CPT CODE		59.38	60.00	3.06	55.00	50.00	11.6
CPT CODE	42826 Tonsillectomy, primary or secondary age 12 or over 168 HERNIA & HYDROCELE PROCEDURES			-			
APG#		57.56	45.00	16.21	73.70	75.00	18.7
CPT CODE	49505 Repair inguinal hernia, age 5 or over  49520 Repair inguinal hernia, any age recurrent	62.69	60.00	10.12	75.37	70.00	18.5
CPT CODE							
APG#	169 SIMPLE HEMORRHOID PROCEDURES  46230 Excision of external hemorrhoid tags and/or multiple papilla	56.36	60.00	11.42	54,17	60.00	9.0
CPT CODE	46230 Excision of external nemorrhoid tags and/or intuitiple papilla 46934 Description of Hemorrhoids, any method, internal	55.91	60.00	13.57	61.60	60.00	14.2
CPT CODE	170 SIMPLE ANAL & RECTAL PROCEDURES EXCEPT HEMORRHOID PROCEDURES	00101	00100	10.01			
APG#	45915 Removal of fecal impaction or foreign body (separate procedu	45,00	45.00	10.61	50.00	50.00	7.0
CPT CODE		50.00	45.00	10.00	51.85	45.00	14.1
CPT CODE	46200 Fissurectomy, with or without sphincterotomy  171 COMPLEX ANAL & RECTAL PROCEDURES	50.00	40100				
APG#		76.82	75.00	10.55	77.67	75.00	12.0
CPT CODE	45170 Excision of Rectal tumor, transanal approach	61,43	60.00	7.95	58.67	60.00	6.1
CPT CODE	46255 Hemorrhoidectomy internal and external, simple	01.43	00.00	7.00	00.01	00100	-
APG#	172 PERITONEAL PROCEDURES & CHANGE OF INTRA-ABDOMINAL TUBE	34.17	30.00	18.69	30.00	30.00	-
CPT CODE	43760 Change of Gastrostomy Tube	37.50	35.00	13.39	N.A.	N.A.	N.A.
CPT CODE	49080 Peritoneocentesis, abdominal paracentesis, or peritoneal lav	37.30	33.00	10.00	141731		1400.00
APG#	173 MISC. DIGESTIVE PROCEDURES	43.33	30.00	17,50	30.00	30.00	
CPT CODE	43750 Percutaneous placement of gastrostomy tube 49421 Insertion of Intraperitoneal cannula or catheter for drainage of dialysis; temporary	56.00	60.00	13.56	N.A.	N.A.	N.A.
CPT CODE		50.00	00.00	10.00	140744		1
APG#	183 SIMPLE URINARY STUDIES & PROCEDURES	31.67	30.00	4.08	45.00	45.00	N.A.
CPT CODE	51720 Bladder instillation of anticarcinogenic agent	35.71	30.00	12.72	N.A.	N.A.	N.A.
CPT CODE	51725 Simple cystometrogram (CMG) (e.g., spinal manometer)	23.33	20.00	5.77	N.A.	N.A.	N.A.
CPT CODE	51736 Simple uroflowmetry (UFR) (e.g., stop-watch flow rate, mechanical uroflowmeter)	23.33	20.00	3.77	14.0.	14.75.	14.75.
APG#	184 RENAL EXTRACORPOREAL SHOCK WAVE LITHOTRIPSY	25.00	25.00		110.00	110.00	28.2
CPT CODE	50590 Lithotripsy, extracorporeal shock wave	25.00	25.00	-	110.00	1.0.00	20.2
APG#	185 URINARY CATHETERIZATION & DILATATION	41.67	30.00	15,41	55.00	55.00	N.A.
CPT CODE	51010 Aspiration of bladder; by trocar or intracatheter with insertion of suprapubic catheter	27.22	25.00	3,63	25.00	25.00	19.A.
CPT CODE	53660 Dilation of female urethra including suppository and/or instillation; initial	12.50	12.50	5.98	7.50	7.50	3.5
CPT CODE	53670 Catheterization, urethra simple	12.50	12.50	5.98	7.50	7.50	3.0
APG# CPT CODE	186 HEMODIALYSIS 90935 Hemodialysis procedure with single physician evaluation	300.00	300.00	63.64	N.A.	N.A.	N.A.

### MEAN, MEDIAN, & STANDARD DEVIATION FOR PROCEDURE O.R. TIMES Hospitals ASCS Standard SURGICAL APG & CPT DESCRIPTION Median Deviation Mean Median Deviation PROCEDURES N.A. N.A. 90937 Hemodialysis procedure requiring repeated evaluation(s) with or without substantial revision of d 316 67 300.00 37.86 N.A. 188 SIMPLE CYSTOURETHROSCOPY APG# 33 27 30.00 10.48 30.36 CPT CODE 52000 Cystourethroscopy (separate procedure) 39.63 40.00 52281 Cystourethroscopy, with calibration and/or dilation or urethral stricture or stenosis, with(out) me 42 17 40.00 7.81 CPT CODE 189 COMPLEX CYSTOURETHROSCOPY & LITHOLAPAXY APG# 9.29 52224 Cystourethroscopy, w/ fulguration or treatment of minor lesion(s) with(out) biopsy 43.57 40.00 52234 Cystourethroscopy, w/fulguration and/or resection of: small 43.64 40.00 45.00 40.00 190 PERCUTANEOUS RENAL ENDOSCOPY, CATHETERIZATION & URETERAL END APG# 60.00 N A NΔ CPT CODE 50392 Introduction of intracatheter or catheter into renal pelvis 64.60 60.00 18 25 ΝΔ NΔ 50393 introduction of ureteral catheter or stent into ureter through renal pelvis for drainage and/or inje 66.40 CPT CODE 50953 Ureteral endoscopy through established ureterostomy, with ureteral catheterization, with(out) dil 60.00 5 94 30.00 30.00 63.13 191 CYSTOTOMY 4 86 53.00 51020 Cystotomy or cystostomy; with fulguration and/or insertion o 37.50 10.61 53.00 6.70 51040 Cystostomy; cystotomy with drainage 51045 Cystostomy w/insertion of ureteral catheter or stent (separate procedure) 60.00 53.00 23.10 53.00 CPT CODE 192 SIMPLE URETHRAL PROCEDURES 53200 Biopsy of urethra 43.75 40.00 CPT CODE 38.75 40.00 40.38 40.00 1.39 53265 Excision or fulguration; urethral, caruncle CPT CODE 193 COMPLEX URETHRAL PROCEDURES 45.00 45.91 40.00 45.00 53220 Excision or fulguration of carcinoma of urethra CPT CODE 60.00 35.00 35.00 ΝΔ 53235 Excision of urethral diverticulum (separate procedure); male 61.36 CPT CODE 209 TESTICULAR EPIDIDYMAL PROCEDURES 50.00 54520 Orchiectomy, simple, w/ or w/o testicular prosthesis, scrota CPT CODE 22,35 65.77 56.67 50.00 54521 Orchiectomy, simple w/ or w/o testicular prosthesis, scrotal 210 INSERTION OF PENILE PROSTHESIS A PG# 119.43 28 77 97 33 98.00 54400 Insertion of penile prosthesis; non-inflatable 54405 Insertion of inflatable (multi-component) penile prosthesis, including placement of pump, cylinde 135.50 37.06 105.00 98.00 32.06 CPT CODE 211 COMPLEX PENILE PROCEDURES 54402 Removal or replacement of non-inflatable (semi-rigid) or inflatable (self-contained) penile prosthe 89 17 63.20 NA. N.A. N.A. 54407 Removal, repair or replacement of inflatable penile prosthesis, including pump and/or reservoir a 89 17 72 50 55.08 50.00 45.00 8.66 CPT CODE 212 SIMPLE PENILE PROCEDURES APG# 10.60 60.00 12.81 34.00 35.00 54152 Circumcision, clamp procedure except newborn 48 53 45.00 48.13 45.00 9.98 54161 Circumcision, surgical excision other than clamp 213 PROSTATE NEEDLE & PUNCH BIOPSY APG# 30.00 CPT CODE 55700 Biopsy, prostate needle or punch single or multiple, any app 30.00 6.09 25.00 9.29 27.50 25.00 6.12 30.00 CPT CODE 55705 Biopsy, prostate incisional, any approach 214 TRANSURETHRAL RESECTION OF PROSTATE & OTHER PROSTATE PROCEDURE CPT CODE 52500 Transurethral resection of bladder neck (separate procedure) 54.38 50.00 15.15 49 40 1 34 63.08 50.00 18 88 89 00 89 00 ΝΔ 52601 Transprethral resection or prostate, including control of postoperative bleeding 237 PROCEDURES FOR PREGNANCY & NEONATAL CARE 28.40 30.00 7.89 27.89 30.00 7.34 59801 Treatment of spontaneous abortion, first trimester, complete 25.00 20.00 7.64 27.67 30.00 6.78 59820 Treatment of missed abortion, any trimester, completed medic 238 THERAPEUTIC ABORTION 30.00 25.00 59840 Legal (therapeutic ) abortion, by dilation and curettage, an 8.33 4.36 30.33 30.00 59841 Legal (therapeutic) abortion, by dilation and evacuation 28.83 30.50 240 FEMALE GENITAL ENDOSCOPY APG#

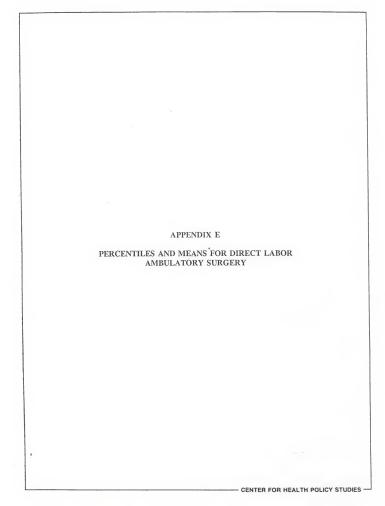
				Hospitals			A.S.C.s	
SURGICAL					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
CPT CODE	E0000	Laparoscopy for visualization of pelvic viscera	61.14	55.00	11.15	58.68	55.00	11.8
CPT CODE	58580	Laparoscopy for visualization of pelvic viscera, with lysis of adhesions	63.83	60.00	20.11	71.24	60.00	31.14
		COLPOSCOPY						
APG#		Colposcopy (vaginoscopy); (separate procedure)	40.63	40.00	1.77	40.56	40.00	1.6
CPT CODE	57452	Colposcopy (vaginoscopy); with biopsies, or biopsy of the cervix	38.73	40.00	11.41	43.00	45.00	2.74
CPT CODE	5/454	MISC. FEMALE REPRODUCTIVE PROCEDURES						
APG#		Biopsy of vulva (separate procedure)	40.13	35.00	14,30	40.00	35.00	7.64
CPT CODE	55500	Biopsy of cervix, circumferential (cone) with or without dilation	33.76	32.00	4.88	40.76	45.00	8.56
CPT CODE								
APG#		DILATION & CURETTAGE	38.63	42,50	9.92	30.33	35.00	8.96
CPT CODE	57820	Dilation and curettage of cervical stump  Dilation and curettage, diagnostic and/or therapeutic (nonobstetrical)	37.83	41.00	8.72	38.63	40.00	13.56
CPT CODE		FEMALE GENITAL EXCISION & REPAIR	07.00	41100	017 E			
APG#			60,00	45.00	27.04	46,43	45.00	6.27
CPT CODE		Vulvectomy; partial, unilateral or bilateral (less than 80%)	45.00	37.50	15.81	40.42	35.00	13.05
CPT CODE		Excision of vaginal cyst or tumor	10100	01100				
APG#		ELECTROENCEPHALOGRAM	95.29	90.00	15.86	N.A.	N.A.	N.A.
CPT CODE		Electroencephalogram (EEG) including recording awake, drowsy	525.00	525.00	403.05	N.A.	N.A.	N.A.
CPT CODE		Polysomnography (recording, analysis and interpretation of t	323.00	323.00	400.00	141741		
APG#	263	NERVE & MUSCLE TESTS  Nerve conduction, velocity and/or latency study; motor, each nerve	21.00	10.00	15.97	N.A.	N.A.	N.A.
CPT CODE			18.57	10.00	10.69	N.A.	N.A.	N.A.
CPT CODE		Nerve conduction, velocity and/or latency study; sensory, each nerve	10.57	10.00	10.00	141/31	140711	111711
APG#		INJECTION OF SUBSTANCE INTO SPINAL CORD	15.71	15.00	1,89	17.50	15.00	6,12
CPT CODE		Injection of anesthetic substance (including narcotics), diagnostic or therapeutic epidural, lumbar	25.00	25.00	5.00	21,00	20.00	8.2
CPT CODE		Injection of substance other than anesthetic, contrast, or n	23.00	20.00	0.00	27100		
APG#	266	NERVE INJECTION & STIMULATION	28.75	32.50	9.46	28.33	20.00	23.8
CPT CODE	64510	Injection, anesthetic agent; stellate ganglion (cervical sympathetic)	34.29	30.00	26.99	36.00	30.00	8.2
CPT CODE		Injection, anesthetic agent; lumbar or thoracic (paravertebral, sympathetic)	54.25	00.00	20.00	00100		
APG#		REVISION & REMOVAL OF NEUROLOGICAL DEVICE	75.00	75.00	15.00	30.00	30.00	N.A.
CPT CODE		Revision or removal of spinal neurostimulator electrodes	70.00	65.00	14.14	60.00	60.00	N.A.
CPT CODE		Revision or removal of spinal neurostimulator receiver	70.00	00.00	14.14	00.00	00.00	141741
APG#		CARPAL TUNNEL RELEASE	61.83	60.00	10.98	53.55	59.00	13.7
CPT CODE		Neuroplasty and/or transposition; median nerve at carpal tun	01.03	80.00	10.56	55.55	33.00	10.7
APG#		NERVE REPAIR & DESTRUCTION	81.15	75.00	20.83	82.25	70.00	30.0
CPT CODE		Neuroplasty and/or transposition ulnar nerve at elbow	88.46	75.00	59.03	66.36	65.00	21.4
CPT CODS		Neuroplasty and/or transposition; ulnar nerve at wrist	88.46	75.00	59.03	00.30	05.00	21.4
APG#	271	COMPLEX NERVE REPAIR	95.91	90.00	52.05	64.29	60.00	18.8
CPT CODE		Suture of digital nerve, hand or foot; one nerve	85.00	90.00	22.22	66,67	65.00	
CPT CODE		Suture of one nerve, hand or foot; common sensory nerve	85.00	90.00	22.22	00.07	05.00	10.0
APG#		SPINAL TAP	00.00	20.00	5.00	AL A	N.A.	N.A.
CPT CODE	62270	Spinal puncture, lumbar, diagnostic	23.33	20.00	10.00	N.A.	N.A.	N.A.
CPT CODE		Spinal puncture, therapeutic, for drainage of spinal fluid (	30.00	30.00	10.00	IN.A.	IV.A.	IN.A.
APG#		SIMPLE LASER EYE PROCEDURES		00.00	11.00	40.00	15,00	2.8
CPT CODE		Trabeculoplasty by laser surgery, one or more sessions	55.50	60.00	14.23	13.33		
CPT CODE		Discission of secondary membraneous cataract, and/or anterio	47.50	60.00	15.45	33.73	30.00	. 17.0
APG#	290	COMPLEX LASER EYE PROCEDURES		07.50	447.70	400.70	440.00	- 00.0
CPT CODE	67105	Repair of retinal detachment, one or more sessions, photocoagulation, with(out) drainage of sub	142.50	97.50	117.79	103.75	110.00	69.6
CPT CODE	67228	Destruction of extensive or progressive retinopathy (e.g., diabetic retinopathy) one or more sess	60.00	60.00	12.25	13.33	15.00	2.8

				Hospitals A.S.C.s						
SURGICAL				Tioopituis	Standard		71101010	Standar		
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviatio		
APG#	291	CATARACT PROCEDURES	1110017	111001011	Doriation		7.1.0.0.1.			
CPT CODE		Removal of lens material; phacofragmentation technique	65.00	60,00	8.98	63,67	70.00	24.5		
CPT CODE		Extraction of lens with or without iridectomy; extracapsular	46.25	30.00	22.40	49.00	30.00	26.0		
CPT CODE		Intracapsular cataract extraction with insertion of intraocular lens prosthesis	73.33	90.00	22.10	49.00	47.50	12.8		
CPT CODE		Extracapsular cataract removal with insertion of intraocular	71.91	83.50	20.69	54.00	50.00	16.0		
CPT CODE		Insertion of intraocular lens subsequent to cataract removal	42.85	30.00	19.10	47.33	49.00	11.1		
APG#		SIMPLE ANTERIOR SEGMENT EYE PROCEDURES FOR GLAUCOMA		0.000						
CPT CODE		Iridotomy by stab incision (separate procedure); except transfixion	34.00	30.00	14.75	35.00	35.00	9.13		
CPT CODE		Cyclocryotherapy initial	52.50	52.50	10.61	39.00	35.00	11.94		
APG#		COMPLEX ANTERIOR SEGMENT EYE PROCEDURES FOR GLAUCOMA	0 8 1 0 0	0 81100						
CPT CODE		Fistulization of sclera for glaucoma; trephination with iridectomy	63.33	60.00	5.77	60.00	60.00	-		
CPT CODE		Fistulization of sclera for glaucoma trabeculectomy ab externo	65.14	60.00	8.57	55.78	60.00	11.98		
APG#		SIMPLE ANTERIOR SEGMENT EYE PROCEDURES EXCEPT FOR GLAUCOMA								
CPT CODE		Destruction of lesion of cornea by cryotherapy, photocoagulation or thermocauterization	45.00	45.00	15.00	42.50	45.00	5.00		
CPT CODE		Discussion or secondary membraneous cataract and/or anterior	48.20	60.00	26.76	40.00	42.50	18.7		
APG#		MODERATE ANTERIOR SEGMENT EYE PROCEDURES								
CPT CODE		Iridectomy, w/corneoscleral or corneal section; peripheral of glaucoma (separate procedure)	38.75	37.50	17.50	33.00	25.00	15.85		
CPT CODE		Removal of secondary membraneous cataract, with corneoscleral section, with(out) iridectomy	46.37	45.00	27.19	60.00	60.00	N.A.		
APG#		COMPLEX ANTERIOR SEGMENT EYE PROCEDURES EXCEPT FOR GLAUCOMA								
CPT CODE		Keratoplasty, penetrating, includes autografts and fresh or preserved grafts	60.00	60.00	-	90.08	96.00	17.16		
CPT CODE		Removal of vitreous, anterior approach; subtotal removal with mechanical vitrectomy	69.44	65.00	17.22	65.62	65.00	4.17		
APG#		SIMPLE POSTERIOR SEGMENT EYE PROCEDURES								
CPT CODE		Destruction of localized lesion of retina (e.g., maculopathy, choroidopathy, small tumors), one o	60.00	60.00	15.00	N.A.	N.A.	N.A.		
CPT CODE		Destruction of extensive or progressive retinopathy (e.g., diabetic retinopathy, one or more sess	67.50	67.50	10,61	45.00	45.00	N.A.		
APG#		COMPLEX POSTERIOR SEGMENT EYE PROCEDURES								
CPT CODE	67036	Vitrectomy, mechanical, pars plana approach	80.00	60.00	48.99	78.75	60.00	42.2		
CPT CODE		Repair of retinal detachment, one or more sessions, cryotherapy or diathermy, with(out) drainag	136.67	120.00	71,47	113.33	120.00	20.82		
APG#	299	STRABISMUS & MUSCLE EYE PROCEDURES								
CPT CODE	67311	Strabismus surgery on patient not previously operated on, an	58.33	45.00	17.50	50.19	45.00	11.40		
CPT CODE		Strabismus surgery on patient not previously operated on; an	63.33	60.00	12.50	66.65	60.00	20.9		
APG#	300	SIMPLE REPAIR & PLASTIC PROCEDURES OF EYE								
CPT CODE		Excision of lesion of eye lid without closure or with simple	52.50	52.50	22.68	34.67	30.00	14.9		
CPT CODE		Repair of entropion suture	52.50	45.00	16.20	49.50	45.00	13.5		
APG#		COMPLEX REPAIR & PLASTIC PROCEDURES OF EYE								
CPT CODE		Repair of blepharoptosis (tarso)-levator resection or advancement, external approach	82.33	82.00	20.88	83.43	82.00	17.5		
CPT CODE		Dacryocystorhinostomy (fistulization of lacrimal sac to nasal cavity)	116.67	120.00	10.00	107.73	120.00	24.0		
APG#		OTORHINOLARYNGOLOGIC FUNCTION TESTS								
CPT CODE		Oscillating tracking test, with recording	45.00	45.00	N.A.	N.A.	N.A.	N.A.		
CPT CODE		Brainstem evoked response recording (evoked response (EEG) audiometry)	81.86	71.00	20.08	N.A.	N.A.	N.A.		
APG#		MAJOR EXTERNAL EAR PROCEDURES								
CPT CODE		Excision exostosis (es), external auditory canal	58.33	50.00	16.02	50.00	50.00			
CPT CODE		Reconstruction of external auditory canal (meatoplasty), separate procedure	91.43	90.00	53.67	97.50	97,50	31.82		
APG#		TYMPANOSTOMY & OTHER SIMPLE MIDDLE EAR PROCEDURES					000			
CPT CODE		Myringotomy including aspiration and/or eustachian tube inflation requiring general anesthesia	34.46	35.00	8.39	33.18	30.00	. 18.48		
CPT CODE		Tympanostomy (requiring insertion of ventilating tube), local or topical anesthesia	25.00	25.00	5.00	21.36	20.00	3.93		
APG#		TYMPANOPLASTY & OTHER COMPLEX MIDDLE EAR PROCEDURES								

				Hospitals		A.S.C.s		
SURGICAL					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
CPT CODE	69631	Tympanoplasty w/o mastoidectomy (including canalplasty, atticotomy and/or middle ear surgery	105.45	90.00	27.70	95.00	90.00	16.90
CPT CODE	69660	Stapedectomy with re-establishment of ossicular continuity, with(out) use of foreign material	135.00	120.00	42.43	135.50	120.00	31.00
APG#	318	SIMPLE AUDIOMETRY						
CPT CODE	92557	Basic comprehensive audiometry	44.40	39.00	17.54	N.A.	N.A.	N.A.
CPT CODE	92567	Tympanometry	10.40	10.00	0.89	N.A.	N.A.	N.A.
APG#	319	REMOVAL OF IMPACTED CERUMEN						
CPT CODE	69210	Removal impacted cerumen (separate procedure), one or both ears	25.00	25.00	5.48	21.00	20.00	2.24
	-	AGGREGATE MEAN FOR ALL SURGICAL PROCEDURES	60.77	56.58	19.76	52.33	50.01	14.29

				Hospitals			A.S.C.s	
SURGICAL					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#		ALLERGY TESTS AND IMMUNOTHERAPY						1
CPT CODE	95001	Percutaneous tests (scratch, puncture, prick) with allergenic extracts, immediate type reaction,	40.00	40.00	N.A.	N.A.	N.A.	N.A.
APG#	157	ALIMENTARY TESTS AND SIMPLE TUBE PLACEMENT						
CPT CODE	91010	Esophageal motility study	60.00	60.00	-	N.A.	N.A.	N.A.
CPT CODE	91030	Esophagus, acid perfusion (Bernstein) test for esophagitis	60,00	60.00	-	N.A.	N.A.	N.A.
APG#	187	PERITONEAL DIALYSIS						
CPT CODE	90945	Dialysis procedure other than hemodialysis (eg, peritoneal, hemofiltration), with single physician	435.00	480.00	369.56	N.A.	N.A.	N.A.
CPT CODE	90947	Dialysis procedure other than hemodialysis (eg. peritoneal, hemofiltration) requiring repeated eva	990.00	990.00	N.A.	N.A.	N.A.	N.A.
APG#	236	PROCEDURES FOR PREGNANCY & NEONATAL CARE						
CPT CODE	59025	Fetal non-stress test	60.00	60.00	N.A.	N.A.	N.A.	N.A.
CPT CODE	59050	Initiation and/or supervision of internal fetal monitoring during labor by consultant with report (se	10.00	10.00	N.A.	N.A.	N.A.	N.A.
APG#		ELECTROCONVULSIVE THERAPY						
CPT CODE	90870	Electroconvulsive therapy (includes necessary monitoring); single seizure	45.00	45.00	N.A.	N.A.	N.A.	N.A.
CPT CODE	90871	Electroconvulsive therapy (includes necessary monitoring); multiple seizures, per day	45.00	45.00	N.A	N.A.	N.A.	N.A.
APG#	265	SUBDURAL & SUBARACHNOID TAP						
CPT CODE		Replacement or irrigation, ventricular catheter	45.00	45.00	N.A.	N.A.	N.A.	N.A.
CPT CODE	63744	Replacement, irrigation or revision of lumbosubarachnoid shunt	107.50	107.50	. 24.75	N.A.	N.A.	N.A.
APG#		NEUROSTIMULATOR AND VENTRICULAR SHUNT IMPLANTATION						
CPT CODE	63650	Percutaneous implantation of neurostimulator electrodes; epidural	105.00	105.00	21.21	N.A.	N.A.	N.A.
CPT CODE		Percutaneous implantation of neurostimulator electrodes; autonomic nerve	90.00	90.00	N.A.	65.00	65.00	N.A.
APG#		MINOR OPTHALMOLOGICAL TESTS & PROCEDURES						
CPT CODE	92235	Ophthalmoscopy, with medical diagnostic evaluation; with fluorescein angiography (includes mul	45.00	45.00	N.A.	N.A.	N.A.	N.A.
APG#		INNER EAR PROCEDURES						
CPT CODE	69806	Endolymphatic sac operation; with shunt	103.33	90.00	23.09	N.A.	N.A.	N.A.
CPT CODE	69840	Revision fenestration operation	90.00	90.00	N.A.	60.00	60.00	N.A.

MEA	AN, MED	IAN, STAI	VDARD DI	EVIATION	& COUNT	FOR PRO	CEDURE C	R. TIME	
			Hosp	oitals			A.S	.C.s	
SURGICAL				Standard				Standard	
PROCEDURES		Mean	Median	Deviation	Count	Mean	Median	Deviation	Count
APG#	315								
CPT CODE	69420	34.46	35.00	8.39	13	33.18	30.00	18.48	11
CPT CODE	69433	25.00	25.00	5.00	9	21.36	20.00	3.93	11
APG#	316								
CPT CODE	69631	105.45	90.00	27.70	11	95.00	90.00	16.90	8
CPT CODE	69660	135.00	120.00	42.43	8	135.50	120.00	31.00	4
APG#	317								
CPT CODE	69806	103.33	90.00	23.09	3	N.A.	N.A.	N.A.	
CPT CODE	69840	90.00	90.00	N.A.	1	60.00	60.00	N.A.	1
APG#	318								
CPT CODE	92557	44.40	39.00	17.54	5	N.A.	N.A.	N.A.	
CPT CODE	92567	10.40	10.00	0.89	5	N.A.	N.A.	N.A.	
APG#	319								
CPT CODE	69210	25.00	25.00	5.48	6	21.00	20.00	2.24	5



		MEAN, MEDIAN, & STANDARD DEVIATION FOR DIRECT LABOR COSTS -		Hospitals			A.S.C.s	
*				Hospitals	Standard		7101010	Standar
SURGICAL		LOCAL DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviatio
PROCEDURES		APG & CPT DESCRIPTION	\$155.12	\$149.08	\$45.13	\$132.43	\$124.94	\$36.59
CPT CODE	19101	Biopsy of breast, incisional	\$136.16	\$131.06	\$32.41	\$119.76		\$40.06
CPT CODE		Excision or cyst, fibroadenoma, or other benign or malignant	\$130.10	\$131.00	432.41	V113.70	V120.40	7.70.00
APG#	28	8REAST RECONSTRUCTION & MASTECTOMY	\$194.39	\$170.64	\$83,04	\$138.72	\$149.69	\$34.55
CPT CODE		Mastectomy for gynecomastia through circular or other incision	\$194.39	\$159.92	\$95,57	\$159.19	\$154.75	\$70.43
CPT CODE		Mastectomy, partial		\$159.92	\$65.76	\$162.61	\$164.99	\$49.77
CPT CODE	19182	Mastectomy, subcutaneous	\$179.06	\$159.67	₹05.76	\$102.01	\$104.33	743.77
APG#	53	OCCUPATIONAL THERAPY			\$20,41	N.A.	N.A.	N.A.
CPT CODE	97540	Training in activities of daily living (self care skills and	\$33.73	\$26.69			N.A.	N.A.
CPT CODE	97541	Training in activities of daily living (self care skills and	\$16.88	\$13.35	\$9.38	N.A.	N.A.	N.A.
APG#	54	PHYSICAL THERAPY			110.05		- N. A	NI A
CPT CODE		Physical medicine treatment to one area hot or cold packs	\$27.01	\$23.87	\$10.25	N.A.	N.A.	N.A.
CPT CODE	97128	Physical medicine treatment to one area, initial 30 minutes,	\$18.67	\$17.58	\$8.17	N.A.	N.A.	N.A.
APG#	55	DIAGNOSTIC ARTHROSCOPY						
CPT CODE	29815	Arthroscopy, shoulder, diagnostic, with(out) synovial biopsy (separate procedure)	\$212.11	\$186.19	\$77.24	\$168.42	\$179.83	\$57.83
CPT CODE	29870	Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)	\$180.54	\$163.37	\$52.19	\$155.61	\$150.83	\$53.45
APG#	56	THERAPEUTIC ARTHROSCOPY					1	
CPT CODE	29877	Arthroscopy, knee, surgical debridement/shaving of cartilage (chondroplasty)	\$177.45	\$179.29	\$34.99	\$156.43	\$165.36	\$52.23
CPT CODE	29881	Arthroscopy, knee, surgical with meniscectomy (medical or lateral including any meniscal shaving)	\$193.65	\$184.61	\$50.52	\$170.69	\$168.53	\$44.32
APG#	57	REPLACEMENT OF CAST						
CPT CODE		Application elbow to finger (short arm)	\$93.09	\$97.34	\$61.05	\$83.73	\$78.90	\$21.71
CPT CODE		Application	\$96.35	\$89.19	\$62.59	\$81.04	\$82.09	\$26.44
APG#	58	SPLINT, STRAPPING & CAST REMOVAL		-				
CPT CODE		Application of short arm splint (forearm to hand); static	\$90.17	\$97.34	\$58.87	\$82.31	\$90.28	\$26.05
CPT CODE		Strapping unna boot	\$20.68	\$21.62	\$10.90	\$45.80	\$45.80	N.A.
APG#	59	TREATMENT OF CLOSED FRACTURE & DISLOCATION OF FINGER, TOE & RIB						
CPT CODE		Treatment of rib fracture, closed, uncomplicated, each	\$51.23	\$39.07	\$38.97	N.A.	N.A.	N.A.
CPT CODE		Treatment of closed phalangeal shaft fracture, proximal or m	\$86.57	\$97.08	\$55.56	\$96.49	\$94.39	\$18.59
APG#	60	TREATMENT OF CLOSED FRACTURE & DISLOCATION EXCEPT FINGER, TOE & RIB						
	25600	Treatment of closed distal radial fracture (e.g., Colles or Smith type) or epiphyseal separation, with(o	\$126.72	\$129.66	\$49.22	\$126.26	\$127.98	\$35.54
CPT CODE	25600	Treatment of closed distal radial fracture (e.g., Colles or Smith type) or epiphyseal separation, with(o	\$143.11	\$133.22	\$47.71	\$119.29	\$119.17	\$17.57
	25005	Treatment of closed distal racture without manipulation	\$95.08	\$90.69	\$40.49	\$95.36	\$95.98	\$43.24
CPT CODE	62	TREATMENT OF OPEN FRACTURE & DISLOCATION EXCEPT FACE						
APG#		Treatment of open distal radial fracture (e.g., Colles or Smith	\$220.18	\$224.28	\$74.97	\$202.93	\$196.02	\$26.26
CPT CODE	25615	Open treatment of closed or open distal radial fracture (e.g.,	\$220.03	\$196,38	\$70.43	\$210.21	\$216.21	\$58.3
CPT CODE	25520	Open treatment of closed or open phalangeal shaft fracture	\$194.96	\$181.80	\$73,54	\$178.08	\$170.54	\$29.0
CPT CODE			110.110				1	
APG#	63	JOINT MANIPULATION UNDER ANESTHESIA	\$117.37	\$122.59	\$38.21	\$112.13	\$103.63	\$50.8
CPT CODE		Manipulation under anesthesia, shoulder joint, including app	\$94.48	\$93.22	\$39.42	\$114.90		
CPT CODE		Manipulation of knee joint under general anesthesia (include	754.40	V33.22	V03.42	¥114.50	7117107	7.1217
APG#	64	SIMPLE MAXILLOFACIAL PROCEDURES	\$141.66	\$131.80	\$51.60	\$159.08	\$161.59	\$20.1
CPT CODE		Drainage of hematoma, nasal, internal approach	\$141.63	\$131.80	\$48.34	\$141.59		
CPT CODE		Excision, nasal polyp(s), simple unilateral	\$176.16	\$152.20	\$62.57	\$138.18		
CPT CODE		Excision, nasal polyp(s), simple bilateral		\$152.20	\$82.84	\$187.51		
CPT CODE	31020	Sinusotomy, maxillary (antrotomy); intranasal, unilateral	\$194.41	\$102.71	₹62.84	9167.51	9100.19	704.4
APG#	65	COMPLEX MAXILLOFACIAL PROCEDURES	11000	1100.55	AF4 15	A170 10	\$191.37	\$60.7
CPT CODE	30520	Septoplasty or submucous resection, with or without cartilage scoring, contouring or replacement without cartilage scoring cartilag	\$195.41	\$186.02	\$54.15			
CPT CODE	30620	Reconstruction, functional, internal nose (septal or other intranasal dermatoplasty)	\$206.72	\$193.52	\$64.35	\$189.12	\$187.39	901.43
APG#	66	INCISION OF BONE, JOINT, & TENDON			1		1100 55	400.70
CPT CODE	25000	Tendon sheath incision at radial styloid for deQuervain's disease	\$147.21	\$151.16	\$59.82	\$115.85	\$123.55	\$38.75

		MEAN, MEDIAN, & STANDARD DEVIATION FOR DIRECT LABOR COSTS -		Hospitals			A.S.C.s	
*				Hospitais	Standard		A.3.0.5	Standar
SURGICAL			Mean	Median	Deviation	Mean	Median	Deviatio
PROCEDURES		APG & CPT DESCRIPTION		\$172.16	\$95.34	N.A.	N.A.	N.A.
CPT CODE	50393	Introduction of ureteral catheter or stent into ureter through renal pelvis for drainage and/or injection,	\$190.87	\$172.16	\$55.04	\$164.28	\$164.28	N.A.
CPT CODE		Ureteral endoscopy through established ureterostomy, with ureteral catheterization, with(out) dilation	\$198.81	\$193.24	\$55.04	\$164.20	\$104.20	IV.A.
APG#	191	CYSTOTOMY				4400.00	\$168.66	N.A.
CPT CODE		Cystotomy or cystostomy; with fulguration and/or insertion o	\$170.01	\$135.90	\$103.14	\$168.66	\$156.24	\$46.73
CPT CODE		Cystostomy; cystotomy with drainage	\$98.88	\$99.19	\$24.88			\$11.27
CPT CODE	51045	Cystostomy w/insertion of ureteral catheter or stent (separate procedure)	\$112.45	\$115.14	\$31.32	\$147.25	\$147.25	\$11.27
APG#	192	SIMPLE URETHRAL PROCEDURES						
CPT CODE	53200	Biopsy of urethra	\$159.96	\$152.95	\$64.52	\$106.35	\$120.03	\$46.58
CPT CODE	53265	Excision or fulguration; urethral, caruncle	\$162.75	\$148.57	\$53.01	\$120.78	\$126.05	\$61.14
APG#	193	COMPLEX URETHRAL PROCEDURES						
CPT CODE		Excision or fulguration of carcinoma of urethra	\$150.54	\$143.66	\$46.40	\$154.79		\$16.79
CPT CODE		Excision of urethral diverticulum (separate procedure); male	\$133.08	\$137.44	\$33.40	\$166.66	\$166.66	N.A.
APG#		TESTICULAR EPIDIDYMAL PROCEDURES						
CPT CODE		Orchiectomy, simple, w/ or w/o testicular prosthesis, scrota	\$175.24	\$175.63	\$76.31	\$142.05		\$49.41
CPT CODE		Orchiectomy, simple w/ or w/o testicular prosthesis, scrotal	\$193.88	\$185.73	\$75.34	\$163.29	\$157.30	\$31.26
APG#	210	INSERTION OF PENILE PROSTHESIS						
CPT CODE		Insertion of penile prosthesis; non-inflatable	\$250.77	\$206.59	\$98.18	\$176.63		\$71.95
CPT CODE	54405	Insertion of inflatable (multi-component) penile prosthesis, including placement of pump, cylinders, an	\$222.14	\$215.39	\$79.84	\$225.36	\$234.50	\$62.77
APG#	211	COMPLEX PENILE PROCEDURES						
CPT CODE	E4403	Removal or replacement of non-inflatable (semi-rigid) or inflatable (self-contained) penile prosthesis	\$195.86	\$199.26	\$64.90	N.A.	N.A.	N.A.
CPT CODE	E4402	Removal, repair or replacement of inflatable penile prosthesis, including pump and/or reservoir and/or	\$180.91	\$190.93	\$54.45	\$181.95	\$181.95	\$22.13
APG#	212	SIMPLE PENILE PROCEDURES						
		Circumcision, clamp procedure except newborn	\$162.99	\$160.13	\$44.28	\$119.44	\$110.63	\$26.99
CPT CODE		Circumcision, surgical excision other than clamp	\$142.92	\$127.81	\$49.46	\$120.99	\$124.24	\$32.69
CPT CODE	213	PROSTATE NEEDLE & PUNCH BIOPSY						
		Blopsy, prostate needle or punch single or multiple, any app	\$92.87	\$96.09	\$27.09	\$82.59	\$77.09	\$46.39
CPT CODE		Biopsy, prostate incisional, any approach	\$139.21	\$146,08	\$42.59	\$120,67	\$131.24	\$50.97
CPT CODE		TRANSURETHRAL RESECTION OF PROSTATE & OTHER PROSTATE PROCEDURE		7	1			1
APG#	214	Transurethral resection of bladder neck (separate procedure)	\$163,10	\$146.61	\$62.78	\$144.50	\$134,54	\$61,24
CPT CODE		Transurethral resection or prostate, including control of postoperative bleeding	\$195.71	\$191.82	\$72.62	\$252.35	\$252.35	N.A.
CPT CODE		PROCEDURES FOR PREGNANCY & NEONATAL CARE	7100111		7		1	
APG#	237		\$114.24	\$104.48	\$48.98	\$89.58	\$97.93	\$24.70
CPT CODE	59801		\$125.89	\$130.54	\$36.54	\$95.15	\$97.96	\$31.57
CPT CODE		Treatment of missed abortion, any trimester, completed medic	V120.00	V100.04	700.04	400.10	10.100	1 10.1101
APG#	238	THERAPEUTIC ABORTION	\$120.08	\$112.96	\$43.39	\$81,06	\$97.93	\$35.91
CPT CODE		Legal (therapeutic ) abortion, by dilation and curettage, an	\$111.99	\$126.83	\$33.84	\$90.72	\$98.74	\$35.24
CPT CODE ·		Legal (therapeutic) abortion, by dilation and evacuation	\$111.33	V120.00	V00.04	+5017 E	100111	
APG#	240	FEMALE GENITAL ENDOSCOPY	\$172.39	\$168.05	\$37,42	\$137.86	\$132.39	\$49.96
CPT CODE	58980	Laparoscopy for visualization of pelvic viscera	\$174.59	\$170.54	\$48.00	\$157.66		
CPT CODE		Laparoscopy for visualization of pelvic viscera, with lysis of adhesions	\$174.59	\$170.54	\$46.00	\$157.00	\$130.55	9/3.3
APG#	241	COLPOSCOPY	1405.00	4400.44	\$27.58	\$94.94	\$83,16	\$36.12
CPT CODE		Colposcopy (vaginoscopy); (separate procedure)	\$125.82	\$126.41	\$30.86	\$85.67	\$86.06	\$47.89
CPT CODE		Colposcopy (vaginoscopy); with biopsies, or biopsy of the cervix	\$131.04	\$123.38	₹30.86	900.67	900.00	947.88
APG#	242	MISC. FEMALE REPRODUCTIVE PROCEDURES	14406	4490 05	407.00	A110 C1	A115 C7	\$36,66
CPT CODE		Biopsy of vulva (separate procedure)	\$140.19	\$139.27	\$37.63	\$112.14		
CPT CODE		Biopsy of cervix, circumferential (cone) with or without dilation	\$127.12	\$123.38	\$30.51	\$114.32	\$119.36	\$32.08
APG#		DILATION & CURETTAGE			1	1100.50	1 100 00	1 440 07
CPT CODE		Dilation and curettage of cervical stump	\$109.57	\$101.33	\$34.07	\$108.59	\$98.99	\$18.97
CPT CODE	58120	Dilation and curettage, diagnostic and/or therapeutic (nonobstetrical)	\$116.39	\$115.51	\$29.58	\$92.41	\$98.10	\$32.83

MEAN MEDIAN, & STANDARD DEVIATION FOR DIRECT LABOR COSTS - SURGICAL PROCEDURES ----ASCS Hospitals Standard SURGICAL Deviation Mean Median Deviation Mean Median APG & CPT DESCRIPTION PROCEDURES \$84.64 \$43,44 65450 Destruction of lesion of cornea by cryotherapy, photocoagulation or thermocauterization \$91.33 \$85.08 \$78.93 CPT CODE 66820 Discussion or secondary membraneous cataract and/or anterior \$141.13 \$151.70 \$49.59 \$94.55 \$108.78 \$39.25 295 MODERATE ANTERIOR SEGMENT EYE PROCEDURES APG# \$146.43 \$157.82 \$39.19 \$80.09 \$84.61 \$41.34 CPT CODE 66625 Iridectomy, w/corneoscleral or corneal section; peripheral of glaucoma (separate procedure) 66830 Removal of secondary membraneous cataract, with corneoscleral section, with(out) iridectomy \$119.57 \$34.26 \$148.56 | \$148.56 N.A. 296 COMPLEX ANTERIOR SEGMENT EYE PROCEDURES EXCEPT FOR GLAUCOMA \$59.01 65750 Keratoplasty, penetrating, includes autografts and fresh or preserved grafts \$96.23 \$96.23 \$42.85 \$136.35 \$151.26 \$173.79 \$49.39 \$104.60 \$120.26 \$48.54 67010 Removal of vitreous, anterior approach; subtotal removal with mechanical vitrectomy \$163.59 CPT CODE 297 SIMPLE POSTERIOR SEGMENT EYE PROCEDURES APG# CPT CODE 67208 Destruction of localized lesion of retina (e.g., maculopathy, choroidopathy, small tumors), one or mor \$119.57 \$138.08 \$83.83 NΔ N.A. N.A. \$83.33 \$76.56 \$76.56 \$69.29 67227 Destruction of extensive or progressive retinopathy (e.g., diabetic retinopathy, one or more sessions; 298 COMPLEX POSTERIOR SEGMENT EYE PROCEDURES \$139.38 \$160.91 \$137.59 CPT CODE 67036 Vitrectomy, mechanical, pars plana approach \$223.12 \$184.42 \$96.74 \$97.52 \$129.63 \$127.00 \$23.40 67101 Repair of retinal detachment, one or more sessions, cryotherapy or diathermy, with(out) drainage of s \$225.96 \$192.60 APG# 299 STRABISMUS & MUSCLE EYE PROCEDURES \$176.96 \$61.34 \$124.07 | \$126.07 \$41.28 CPT CODE 67311 Strabismus surgery on patient not previously operated on, an \$121.06 \$126.94 \$162 63 | \$172 55 \$39.81 CPT CODE 67312 Strabismus surgery on patient not previously operated on; an 300 SIMPLE REPAIR & PLASTIC PROCEDURES OF EYE \$158.36 \$170.92 \$37.32 \$85.11 \$82.80 \$37.66 CPT CODE 67840 Excision of Jesian of eye lid without closure or with simple \$161.61 \$40.47 \$96.39 \$102,44 \$36,33 \$153.50 CPT CODE 67921 Repair of entropion suture 301 COMPLEX REPAIR & PLASTIC PROCEDURES OF EYE APG# 67904 Repair of blepharoptosis (tarso)-levator resection or advancement, external approach \$172.55 \$47.61 \$122.46 \$127.67 \$58.10 \$172.37 CPT CODE \$59.00 \$218.80 \$200.23 \$54.54 \$157 13 \$152 92 CPT CODE 68720 Dacryocystorhinostomy (fistulization of lacrimal sac to nasal cavity) 313 OTORHINOLARYNGOLOGIC FUNCTION TESTS \$38.56 \$38.56 ΝΔ N.A N.A. N.A. CPT CODE 92545 Oscillating tracking test, with recording 92565 Brainstem evoked response recording (evoked response (EEG) audiometry) \$55.84 \$56.05 \$29.87 N.A. N.A. N.A. CPT CODE 314 MAJOR EXTERNAL EAR PROCEDURES APG# \$32.32 \$158.69 \$145.87 \$30.99 69140 Excision exostosis (es), external auditory canal \$140.37 \$133.47 CPT CODE 69310 Reconstruction of external auditory canal (meatoplasty), separate procedure \$172.09 \$126.80 \$90.27 \$200.17 \$200.17 \$12.23 315 TYMPANOSTOMY & OTHER SIMPLE MIDDLE EAR PROCEDURES APG# 69420 Myringotomy including aspiration and/or eustachian tube inflation requiring general anesthesia \$101.61 \$97.88 \$89.72 \$90.38 \$26.80 CPT CODE \$90.54 699 90 \$27.45 \$67.83 \$66.92 \$32.53 69433 Tympanostomy (requiring insertion of ventilating tube), local or topical anesthesia CPT CODE 316 TYMPANOPLASTY & OTHER COMPLEX MIDDLE FAR PROCEDURES APG# CPT CODE 69631 Tympanoplasty w/o mastoidectomy (including canalplasty, atticotomy and/or middle ear surgery), initi \$196.37 \$60.17 \$194.02 \$180.56 \$60.48 \$263.49 \$263.94 \$95.03 69660 Stapedectomy with re-establishment of ossicular continuity, with(out) use of foreign material \$225.30 \$206.74 \$92.97 CPT CODE APG# 318 SIMPLE AUDIOMETRY 92557 Rasic comprehensive audiometry \$46.12 \$45.23 \$16.96 N.A. N A CPT CODE \$15.78 N.A. N.A. 92567 Tympanometry \$16.42 CPT CODE APG# 319 REMOVAL OF IMPACTED CERUMEN \$84.87 \$89.42 \$43.16 \$76.03 \$81.15 \$12.46 69210 Removal impacted cerumen (separate procedure), one or both ears AGGREGATE MEAN FOR ALL SURGICAL PROCEDURES \$137.30 \$130.20 \$54.10 | \$126.15 | \$126.05 | \$40.63

		MEAN, MEDIAN, & STANDARD DEVIATION FOR DIRECT LABOR COSTS -	SURGICA		DURES			
				Hospitals			A.S.C.s	
SURGICAL					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	134	8LOOD & 8LOOD PRODUCT EXCHANGE						
CPT CODE	36455	Exchange transfusion, blood, other than newborn	\$49.83	\$49.83	N.A.	N.A.	N.A.	N.A.
CPT CODE	36520	Therapeutic apheresis (plasma and/or cell exchange)	\$146.25	\$112.79	\$128.91	N.A.	N.A.	N.A.
APG#		ALLERGY TESTS AND IMMUNOTHERAPY						
CPT CODE	95001	Percutaneous tests (scratch, puncture, prick) with allergenic extracts, immediate type reaction, speci	\$18.22	\$18.22	N.A.	N.A.	N.A.	N.A.
APG#		PROCEDURES FOR PREGNANCY & NEONATAL CARE						
CPT CODE		Fetal non-stress test	\$28.83	\$28.83	N.A.	N.A.	N.A.	N.A.
CPT CODE	59050	Initiation and/or supervision of internal fetal monitoring during labor by consultant with report (separa	\$49.58	\$49.58	N.A.	N.A.	N.A.	N.A.
APG#		ELECTROCONVULSIVE THERAPY						
CPT CODE	90870	Electroconvulsive therapy (includes necessary monitoring); single seizure	\$33.76	\$33.76	\$12.45	N.A.	N.A.	N.A.
CPT CODE	90871	Electroconvulsive therapy (includes necessary monitoring); multiple seizures, per day	\$26.41	\$26.41	N.A.	N.A.	N.A.	N.A.
APG#	265	SU8DURAL & SU8ARACHNOID TAP						
CPT CODE	62225	Replacement or irrigation, ventricular catheter	\$28.03	\$28.03	N.A.	N.A.	N.A.	N.A.
CPT CODE	63744	Replacement, irrigation or revision of lumbosubarachnoid shunt	\$162.92	\$162.92	\$71.83	N.A.	N.A.	N.A.
APG#	268	NEUROSTIMULATOR AND VENTRICULAR SHUNT IMPLANTATION						
CPT CODE	63650	Percutaneous implantation of neurostimulator electrodes; epidural	\$214.44	\$214.44	\$6.81	N.A.	N.A.	N.A.
CPT CODE	64560	Percutaneous implantation of neurostimulator electrodes; autonomic nerve	\$219.25	\$219.25	N.A.	\$217.41	\$217.41	N.A.
APG#		MINOR OPTHALMOLOGICAL TESTS & PROCEDURES			1			
CPT CODE	92235	Ophthalmoscopy, with medical diagnostic evaluation; with fluorescein angiography (includes multifra	\$6.16_	\$6.16	N.A.	N.A.	N.A.	N.A.
APG#	317	INNER EAR PROCEDURES						
CPT CODE	69806	Endolymphatic sac operation; with shunt	\$138.56	\$128.32	\$32.79	N.A.	N.A.	N.A.
CPT CODE	69840	Revision fenestration operation	\$112.12	\$112.12	N.A.	\$36.66	\$36.66	N,A.

	DIAN, STAN			oitals			A.S	.C.s	
SURGICAL	+		1100/	Standard		1		Standard	
PROCEDURES		Mean	Median	Deviation	Count	Mean	Median	Deviation	Count
APG#	2	Ividali	WIGOIGH	Deviction					
CPT CODE	19000	\$65.20	\$55.35	\$28.94	10	\$64.85	\$50.08	\$30.83	5
CPT CODE	19100	\$175.60	\$153.71	\$120.35	6	\$84.74	\$90.38	\$38.14	7
CPT CODE	60100	\$94.16	\$94.16	\$35.33	2	\$152.10	\$152.10	N.A.	1
APG#	3	754.10	V34.10	700100					
CPT CODE	10000	\$112.67	\$107.94	\$49.22	17	\$101.94	\$90.66	\$40.55	7
	10060	\$112.07	\$119.90	\$43.90	19	\$82.35	\$83.90	\$31,25	11
CPT CODE	10120	\$118.41	\$119.35	\$49.02	18	\$103.74	\$99.78	\$36.42	15
CPT CODE	4	\$110.41	9115.50	V43.02		110017			
APG#		\$150.50	\$140.15	\$42.81	15	\$115.73	\$114.52	\$42,62	11
CPT CODE	10141	\$183.23	\$165.96	\$73.63	15	\$126.98	\$129.95	\$49.90	9
CPT CODE	10180	\$183.23	\$100.96	\$33.13	11	\$134.38	\$123.28	\$44.44	5
CPT CODE		\$172.25	\$129.00	\$73.81	10	\$159.49	\$155.55	\$30.44	4
CPT CODE	28002	\$172.25	\$109.55	7/3.01		¥100.40	7100100	100111	
APG#	5	101.00	\$82.59	\$31.60	14	\$96.78	\$97.70	\$13.33	6
CPT CODE	11700	\$84.90	\$95.41	\$32.86	15	\$104.14	\$104.03	\$9.03	6
CPT CODE	11701	\$94.83	\$95.41	93Z.00	15	3104.14	\$104.03	93.03	
APG#	6		140400	140.40	14	\$117.97	\$111.52	\$41.72	10
CPT CODE	11040	\$129.53	\$124.33	\$49.18	15	\$86.66	\$88.49	\$38.38	10
CPT CODE	11730	\$103.17	\$98.50	\$35.59			\$103.56	\$29.79	9
CPT CODE	17000	\$101.12	\$108.00	\$24.03	10	\$106.13	\$117.61	\$50.20	15
CPT CODE	20670	\$161.57	\$149.40	\$59.76	17	\$124.74	\$117.01	\$50.20	- 10
APG#	7					4404.04	\$98.91	\$24.13	13
CPT CODE	11401	\$100.82	\$98.36	\$35.20	24	\$101.34			16
CPT CODE	11440	\$108.87	\$98.18	\$44.15	26	\$93.76	\$98.95	\$28.96	12
CPT CODE	11601	\$104.57	\$97.46	\$44.47	25	\$100.22	\$96.69	\$22.48	
CPT CODE	11642	\$118.54	\$104.03	\$63.34	26	\$109.29	\$104.48	\$31.56	15
APG#	8								
CPT CODE	11404	\$114.07	\$118.81	\$38.25	17	\$99.40	\$108.87	\$29.70	18
CPT CODE	11406	\$110.36	\$114.96	\$36.97	18	\$105.85	\$112.03	\$38.89	19
CPT CODE	11643	\$125.05	\$127.42	\$52.42	16	\$111.67	\$107.86	\$35.22	12
APG#	9								
CPT CODE	15839	\$174.23	\$178.01	\$58.62	12	\$143.71	\$145.52	\$64.15	6
CPT CODE	15972	\$207.50	\$211.98	\$63.29	13	\$207.81	\$186.37	\$54.59	4
CPT CODE	37735	\$238.36	\$208.53	\$70.99	9	\$279.99	\$260.55	\$49.55	4
APG#	10								
CPT CODE	12001	\$90.28	\$81.31	\$45.22	20	\$100.25	\$103.60	\$18.04	6
CPT CODE	12002	\$91.50	\$84.22	\$42.37	20	\$104.60	\$99.00	\$31.29	7
CPT CODE	12031	\$116.17	\$112.84	\$57.68	14	\$107.45	\$117.89	\$41.90	7
APG#	11								
CPT CODE	12015	\$107.35	\$109.76	\$52,19	12	\$116.22	\$112.16	\$9.17	5

\$47.71

\$40,49

\$133.22 \$90.69

15

8

\$119.29

\$95.36

MEAN, MEDIAN, STANDARD DEVIATION & COUNT FOR DIRECT LABOR COSTS - SURGICAL PROCEDURES

Standard

Hospitals

A.S.C.s

\$119.17

\$95.98

\$43.24

Standard

Count

8

5

SURGICAL

CPT CODE

CPT CODE

APG#

25605

28470

62

\$143,11

\$95.08

MEAN, MEDIAN, STANDARD DEVIATION & COUNT FOR DIRECT LABOR COSTS - SURGICAL PROCEDURES  West Hospitals  A.S.C.s  Standard Count  Mean Median Deviation Count  Mean	Hospitals A.S.C.s Standard Standard Standard Departure	
Median   Deviation   Count   Mean   Median   Deviation   Count   Cou	AL Standard Many Marian Davistian	
Median   Devisition   Devisition   Devisition   Count   Median   Devisition   Dev		
PPF CODE		Count
EPT CODE 26620 4920.03 4196.38 970.43 15 \$210.21 \$216.21 \$58.35 \$70 CODE 2673 5194.98 1918.90 97.54 16 \$175.08 \$170.54 \$220.99 \$170.54 \$220.99 \$170.73 \$122.99 \$170.73 \$122.99 \$170.73 \$170.99	DE 25615 \$220.18 \$224.28 \$74.97 13 \$202.93 \$196.02 \$26.26	4
PT CODE   26735   3194,96   5181,80   973,54   16   5178,08   5170,54   \$22,09   \$28,09   \$36.67   \$28,09   \$36.67   \$28,09   \$36.67   \$3700   \$117,37   \$122,59   \$38.21   12   \$112,13   \$103,63   \$50.67   \$2700   \$27570   \$94.48   \$93,22   \$39,42   13   \$114,90   \$117,37   \$42,14   \$127,00   \$27570   \$94.48   \$93,22   \$39,42   13   \$114,90   \$117,37   \$42,14   \$127,00   \$117,37   \$42,14   \$113,18   \$113,37   \$42,14   \$127,00   \$117,37   \$11	DF 25620 \$220.03 \$196.38 \$70.43 15 \$210.21 \$216.21 \$58.35	7
ARGE 63 PFT CODE 23700 \$117.37 \$122.59 \$38.21 12 \$112.13 \$103.63 \$50.87 PFT CODE 25700 \$117.37 \$122.59 \$38.21 12 \$112.13 \$103.63 \$50.87 PFT CODE 27570 \$94.48 \$93.22 \$39.42 13 \$114.90 \$117.37 \$42.14 ARGE 64 ARGE 64 ARGE 65		8
PPT CODE 23700 \$117.37 \$122.99 \$38.21 12 \$112.13 \$103.63 \$50.67 \$42.14 \$172.00 \$117.37 \$42.14 \$117.00 \$117.37 \$42.14 \$117.00 \$117.37 \$42.14 \$117.00 \$	63	
PPT CODE 27570 894.48 893.22 \$39.42 13 \$114.90 \$117.37 \$42.14 RPGF 64	DE 23700 \$117.37 \$122.59 \$38.21 12 \$112.13 \$103.63 \$50.87	14
AFGF 64 9131.80 \$131.80 \$151.60 12 \$159.08 \$161.59 \$20.14   PPT CODE 30010 \$141.66 \$131.80 \$151.60 12 \$159.08 \$161.59 \$20.14   PPT CODE 30110 \$141.63 \$139.08 \$48.34 14 \$141.59 \$133.36 \$444.01   PPT CODE 30111 \$176.16 \$158.20 \$42.57 14 \$138.18 \$143.70 \$471.12   PPT CODE 30120 \$194.41 \$162.21 \$182.20 \$42.57 14 \$138.18 \$143.70 \$471.12   PPT CODE 30520 \$195.41 \$186.02 \$54.15 18 \$179.18 \$191.37 \$60.79   PPT CODE 30520 \$206.72 \$195.41 \$186.02 \$54.15 18 \$179.18 \$191.37 \$60.79   PPT CODE 30520 \$195.41 \$186.02 \$54.15 18 \$179.18 \$191.37 \$60.79   PPT CODE 30520 \$147.21 \$193.52 \$48.35 14 \$189.12 \$187.39 \$81.49   PPT CODE 28000 \$147.21 \$151.16 \$59.82 15 \$115.85 \$123.55 \$38.75   PPT CODE 28200 \$147.21 \$151.16 \$59.82 15 \$151.85 \$123.55 \$38.75   PPT CODE 28230 \$165.53 \$169.32 \$41.68 16 \$144.19 \$140.54 \$61.05   PPT CODE 28230 \$165.55 \$165.58 \$48.00 16 \$16 \$146.55 \$153.10 \$464.3   PPT CODE 28100 \$121.80 \$118.61 \$38.05 19 \$101.42 \$105.88 \$29.57   PPT CODE 28100 \$121.80 \$118.61 \$38.05 19 \$101.42 \$105.88 \$29.57   PPT CODE 28100 \$124.07 \$145.04 \$42.62 16 \$124.35 \$123.55 \$313.64   PRG 69 69 69 69 69 69 69 69 69 69 69 69 69	100 10 100 100 100 100 100 100 1117 27   \$42 14	11
PPT CODE 30000 \$141.68 \$131.80 \$51.60 \$12 \$159.08 \$161.59 \$20.14 \$197.09 \$133.36 \$44.01 \$197.00 \$133.00 \$141.63 \$139.08 \$48.34 \$14 \$141.59 \$133.36 \$44.01 \$197.00 \$141.63 \$139.08 \$48.34 \$14 \$141.59 \$133.36 \$44.01 \$197.00 \$141.63 \$139.08 \$133.36 \$44.01 \$197.00 \$130.00 \$141.63 \$139.08 \$141.63 \$139.08 \$133.36 \$44.01 \$197.00 \$130.00 \$141.63 \$139.08 \$141.63 \$139.00 \$141.63 \$139.18 \$143.70 \$47.12 \$197.00 \$130.00 \$194.41 \$118.60 \$162.70 \$42.84 \$13 \$187.01 \$186.19 \$44.01 \$186.19 \$48.45 \$109.00 \$109	64	
PPT CODE	DE 30000 \$141.66 \$131.80 \$51.60 12 \$159.08 \$161.59 \$20.14	5
PRY CODE 30111 \$176.16 \$152.20 \$62.57 14 \$139.18 \$143.70 \$47.12 \$176.05 \$194.41 \$196.21 \$182.94 \$13 \$185.19 \$184.19 \$186.45 \$186.79 \$864.45 \$187.00 \$194.41 \$186.02 \$184.19 \$186.19 \$864.45 \$187.00 \$195.00 \$1	30110 \$141.63 \$139.08 \$48.34 14 \$141.59 \$133.36 \$44.01	. 7
PT CODE 31020 \$194.41 \$162.71 \$32.84 \$13 \$187.51 \$186.19 \$64.45 \$187.67 \$65 \$195.41 \$186.02 \$54.15 \$18 \$179.18 \$191.37 \$60.79 \$197.00E \$30620 \$420.672 \$193.52 \$64.55 \$14 \$189.19 \$191.37 \$60.79 \$161.49 \$197.00E \$30620 \$420.672 \$1993.52 \$46.35 \$14 \$189.12 \$187.39 \$61.49 \$161.49 \$189.12 \$187.39 \$61.49 \$161.49 \$189.12 \$187.39 \$61.49 \$161.49 \$189.12 \$187.39 \$61.49 \$161.49 \$189.12 \$187.39 \$61.49 \$161.		6
ARGE 65 PFT CODE 30520 8195.41 6186.02 854.15 18 8179.18 8191.37 860.79 PFT CODE 30520 8206.72 9193.52 964.35 14 8189.12 8187.39 861.49 ARGE 66 PFT CODE 25000 8147.21 9151.16 859.82 15 9115.85 8123.55 938.76 PFT CODE 25000 8147.21 9151.16 859.82 15 9115.85 8123.55 938.76 PFT CODE 28200 8160.79 8136.32 873.47 16 8139.43 8142.82 952.22 ARGE 67 PFT CODE 28200 8165.53 8169.32 841.88 16 9141.19 9140.54 951.05 PFT CODE 28202 8165.95 9165.95 948.00 16 9141.19 9140.54 951.05 PFT CODE 28203 8165.95 9185.58 948.00 16 9141.19 9140.54 951.05 PFT CODE 28200 8144.07 9145.04 942.62 16 9124.35 9124.77 913.64 PFT CODE 28200 8164.07 9145.04 942.62 16 9124.35 9124.77 913.64 PFT CODE 28200 8159.22 9158.33 934.85 14 9124.44 9120.96 934.25 PFT CODE 27345 9159.37 9173.36 952.45 13 9129.40 9133.13 943.83 PFT CODE 27345 9159.37 9173.36 952.45 13 9129.40 9133.13 943.83 PFT CODE 28236 9162.21 9157.43 949.89 14 9125.67 9131.60 923.11 PFT CODE 28456 912.47 9152.21 9157.43 949.89 14 9125.67 9131.60 923.11 PFT CODE 28457 9162.21 9157.43 949.89 14 9125.67 9131.60 923.11 PFT CODE 28458 9139.74 9155.79 930.73 16 910.60 9143.09 931.33 PFT CODE 28238 9139.74 9135.72 944.64 12 9159.85 9139.80 946.45 PFT CODE 28238 9139.74 9135.72 944.64 12 9159.85 9139.80 946.45 PFT CODE 28238 9139.74 9135.72 944.64 12 9159.85 9139.80 946.45 PFT CODE 28238 9139.74 9135.72 944.64 12 9159.85 9139.80 946.45 PFT CODE 28238 9139.74 9135.72 944.64 12 9159.85 9139.80 946.45 PFT CODE 28238 9139.74 9135.72 944.64 12 9159.85 9139.80 946.45 PFT CODE 28238 9139.74 9135.72 944.64 12 9159.85 9139.80 946.45 PFT CODE 28238 9139.74 9135.72 944.64 12 9159.85 9139.80 946.45 PFT CODE 28238 9139.74 9135.72 944.64 12 9159.85 9139.80 946.45 PFT CODE 28238 9139.74 9135.72 944.64 12 9159.33 9129.39 944.66 9139.79 9139.73 9139.73 9170.90 9139.90 9139.93 9170.90 9139.93 9170.90 9139.93 9170.90 9139.93 9170.90 9139.93 9170.90 9139.93 9170.90 9139.93 9170.90 9139.93 9170.90 9139.93 9170.90 9139.93 9170.90 9139.93 9170.90 9139.93 9170.90 9139.93 9170.90 9139.93 9170.90 9139.93 9170.90 9139.93	100 04 100 04 100 04 100 100 100 100 100	12
EPT CODE 30520 \$195.41 \$186.02 \$54.15 18 \$179.18 \$191.37 \$60.79 \$10.79 \$	65	
CPT CODE 30820 \$206.72 \$193.52 \$64.35 \$14 \$189.12 \$187.39 \$61.49 \$487.39 \$61.49 \$487.39 \$61.49 \$487.39 \$61.49 \$487.39 \$61.49 \$487.39 \$61.49 \$487.39 \$61.49 \$487.39 \$61.49 \$487.39 \$61.49 \$487.39 \$61.49 \$487.39 \$61.49 \$487.39 \$61.49 \$487.39 \$61.49 \$487.39 \$61.49 \$487.39 \$61.49 \$487.39 \$61.49 \$487.39 \$61.4	DE 30520 \$195.41 \$186.02 \$54.15 18 \$179.18 \$191.37 \$60.79	21
APGF 66 PFT CODE 28270 116.079 136.32 873.47 16 8139.43 5123.55 838.76 PFT CODE 28270 116.079 136.32 873.47 16 8139.43 5142.82 825.22 PFT CODE 28280 116.553 1169.32 841.68 16 8141.19 5140.54 851.05 PFT CODE 28280 116.553 169.32 841.68 16 8141.19 5140.54 851.05 PFT CODE 28282 116.555 1855.50 18	461 49	13
PPT CODE 28000 \$144.721 \$151.16 \$59.82 \$15 \$115.85 \$123.55 \$938.75 \$270 \$150.79 \$150.79 \$150.39 \$130.32 \$153.34 \$143.82 \$25.22 \$270 \$160.79 \$139.34 \$139.32 \$143.82 \$25.22 \$270 \$160.79 \$139.34 \$165.53 \$124.73 \$25.22 \$270 \$165.53 \$185.35 \$169.32 \$270 \$160.79 \$160.	66	
PT CODE   28270   \$180.79   \$136.32   \$73.47   \$16   \$139.43   \$142.82   \$25.22	DE 25000 \$147.21 \$151.16 \$59.82 15 \$115.85 \$123.55 \$38.75	19
ARGE 67 PT CODE 28292 \$165.95 \$169.92 \$41.68 \$16 \$141.19 \$140.54 \$51.05 \$ PT CODE 28292 \$165.95 \$165.85 \$48.00 \$16 \$1.05 \$140.55 \$153.10 \$46.43 \$ PT CODE 28292 \$165.95 \$165.85 \$48.00 \$16 \$140.85 \$153.10 \$46.43 \$ PT CODE 26160 \$121.80 \$118.61 \$33.05 \$19 \$101.42 \$105.88 \$29.57 \$ PT CODE 26160 \$121.80 \$118.61 \$33.05 \$19 \$101.42 \$105.88 \$29.57 \$ PT CODE 26160 \$144.07 \$145.04 \$42.62 \$16 \$124.35 \$124.77 \$31.64 \$ PT CODE 26160 \$144.07 \$145.04 \$42.62 \$16 \$144.35 \$124.77 \$43.64 \$ PT CODE 27345 \$163.97 \$173.36 \$52.45 \$13 \$129.40 \$133.13 \$43.83 \$ PT CODE 27345 \$163.97 \$173.36 \$52.45 \$13 \$129.40 \$133.13 \$43.83 \$ PT CODE 26355 \$162.24 \$157.43 \$49.89 \$14 \$125.67 \$131.60 \$23.11 \$ PT CODE 26405 \$162.24 \$156.36 \$54.14 \$15 \$140.60 \$143.09 \$31.33 \$ PT CODE 26405 \$162.24 \$157.43 \$49.89 \$14 \$125.67 \$131.60 \$23.11 \$ PT CODE 26455 \$152.43 \$152.79 \$30.73 \$16 \$100.44 \$100.69 \$29.94 \$ PT CODE 26265 \$109.41 \$135.72 \$44.64 \$12 \$159.85 \$139.80 \$46.45 \$ PT CODE 26265 \$109.41 \$101.82 \$50.26 \$28 \$96.53 \$95.52 \$22.85 \$ PT CODE 26265 \$109.41 \$101.82 \$50.26 \$28 \$96.53 \$95.52 \$23.85 \$ PT CODE 26265 \$109.41 \$101.82 \$50.26 \$28 \$96.53 \$95.52 \$23.85 \$ PT CODE 26360 \$200.16 \$197.17 \$86.90 \$18 \$188.17 \$171.95 \$463.93 \$ PT CODE 26360 \$200.16 \$197.17 \$86.90 \$18 \$188.17 \$171.95 \$463.93 \$ PT CODE 26360 \$143.61 \$144.31 \$343.76 \$18 \$139.00 \$141.88 \$463.93 \$ PT CODE 26360 \$200.16 \$197.17 \$86.90 \$18 \$168.17 \$171.95 \$463.93 \$ PT CODE 26360 \$200.16 \$197.17 \$86.90 \$18 \$168.17 \$171.95 \$463.93 \$ PT CODE 26360 \$200.16 \$197.17 \$86.90 \$18 \$168.17 \$171.95 \$463.93 \$ PT CODE 26360 \$200.16 \$197.17 \$86.90 \$18 \$168.17 \$171.95 \$463.93 \$ PT CODE 26360 \$200.16 \$197.17 \$86.90 \$18 \$168.17 \$171.95 \$463.93 \$ PT CODE 26360 \$200.16 \$197.17 \$86.90 \$18 \$169.90 \$141.88 \$463.93 \$ PT CODE 26360 \$200.16 \$197.17 \$86.90 \$18 \$190.00 \$141.88 \$463.93 \$ PT CODE 26360 \$200.16 \$197.17 \$86.90 \$18 \$190.00 \$141.88 \$463.93 \$ PT CODE 26360 \$200.16 \$197.17 \$86.90 \$18 \$190.00 \$141.88 \$463.93 \$ PT CODE 26360 \$200.16 \$197.17 \$86.90 \$18 \$190.00 \$141.88 \$463.93 \$  PT CODE 26360 \$200.16 \$197.17 \$86.90 \$18 \$1	20 442042 6142 62 626 22	9
PFT CODE   28290   \$165.53   \$169.32   \$41.68   16   \$141.19   \$140.54   \$51.05   \$16.95		
PROPERTY		19
APG# 68 PT CODE 26100 \$121.80 \$118.61 \$38.05 \$19 \$101.42 \$105.88 \$29.57 \$ PT CODE 26000 \$144.07 \$145.04 \$42.62 \$16 \$124.35 \$124.77 \$31.64 \$  APG# 69 PT CODE 27345 \$163.97 \$173.36 \$52.45 \$13 \$129.40 \$133.13 \$43.85 \$  PT CODE 27345 \$163.97 \$173.36 \$52.45 \$13 \$129.40 \$133.13 \$43.83 \$  APG# 70 \$1000 \$25447 \$162.21 \$157.43 \$49.89 \$14 \$125.67 \$131.80 \$22.11 \$  PT CODE 25447 \$162.21 \$157.43 \$49.89 \$14 \$125.67 \$131.80 \$23.11 \$  PT CODE 25447 \$162.21 \$157.43 \$49.89 \$14 \$125.67 \$131.80 \$23.11 \$  PT CODE 25447 \$162.21 \$157.43 \$49.89 \$14 \$125.67 \$131.80 \$23.11 \$  PT CODE 26535 \$122.44 \$156.36 \$54.14 \$15 \$140.60 \$143.09 \$431.33 \$  APG# 71 \$  PT CODE 26455 \$127.43 \$125.79 \$30.73 \$16 \$100.84 \$100.69 \$29.94 \$  PT CODE 26455 \$109.41 \$101.82 \$50.26 \$28 \$96.53 \$96.62 \$23.85 \$  PT CODE 26265 \$109.41 \$101.82 \$50.26 \$28 \$96.53 \$96.62 \$23.85 \$  PT CODE 26265 \$109.41 \$101.82 \$50.26 \$28 \$96.53 \$96.62 \$23.85 \$  PT CODE 26265 \$109.41 \$101.82 \$50.26 \$28 \$96.53 \$96.62 \$23.85 \$  PT CODE 26680 \$200.16 \$197.17 \$68.90 \$18 \$188.17 \$171.95 \$63.93 \$  PT CODE 26800 \$143.61 \$144.31 \$34.76 \$18 \$139.00 \$141.88 \$18.39 \$  PT CODE 26810 \$143.61 \$144.31 \$34.76 \$18 \$139.00 \$141.88 \$18.39 \$  PT CODE 28810 \$143.61 \$144.31 \$34.76 \$18 \$139.00 \$141.88 \$18.39 \$	10 10 10 10 10 10 10 10 10 10 10 10 10 1	15
PT CODE 26160 5121.80 5118.61 \$38.05 19 \$101.42 \$105.88 \$22.57   PT CODE 28000 144.07 \$145.04 \$42.62 16 \$124.35 \$124.77 \$31.64   ARG 6 69   PT CODE 24105 \$159.22 \$158.33 \$34.85 14 \$124.14 \$120.96 \$34.25   PT CODE 27345 \$163.97 \$173.39 \$152.45 13 \$129.40 \$133.13 \$43.83   ARG 7		
PPT CODE   28080   \$144.07   \$145.04   \$42.62   16   \$124.35   \$124.77   \$31.64     PPT CODE   28080   \$144.07   \$145.04   \$42.62   16   \$124.35   \$124.77   \$31.64     PPT CODE   24105   \$185.92   \$158.33   \$24.85   14   \$124.14   \$120.96   \$34.25     PPT CODE   27345   \$163.37   \$173.36   \$52.45   13   \$129.40   \$133.13   \$43.83     PPT CODE   27345   \$163.37   \$173.36   \$52.45   13   \$129.40   \$133.13   \$43.83     PPT CODE   25447   \$162.21   \$157.43   \$49.89   14   \$125.67   \$131.60   \$23.11     PPT CODE   25437   \$162.24   \$157.43   \$49.89   14   \$125.67   \$131.60   \$43.01     PPT CODE   25437   \$162.34   \$155.79   \$30.73   \$16   \$100.84   \$100.69   \$31.33     PPT CODE   28234   \$139.74   \$135.72   \$44.64   \$12   \$159.85   \$139.80   \$46.45     PPT CODE   26955   \$109.41   \$101.82   \$50.26   \$28   \$99.53   \$95.62   \$23.85     PPT CODE   28288   \$169.07   \$174.99   \$32.19   \$24   \$129.13   \$127.93   \$35.35     PPT CODE   26860   \$200.16   \$197.17   \$68.90   \$18   \$188.17   \$171.95   \$63.93     PPT CODE   28810   \$143.61   \$144.31   \$34.76   \$18   \$139.00   \$141.88   \$18.39     PPT CODE   28810   \$143.61   \$144.31   \$34.76   \$18   \$139.00   \$141.88   \$18.39     PPT CODE   28810   \$143.61   \$144.31   \$34.76   \$18   \$139.00   \$141.88   \$18.39     PPT CODE   28810   \$143.61   \$144.31   \$34.76   \$18   \$139.00   \$141.88   \$18.39     PPT CODE   28810   \$143.61   \$144.31   \$34.76   \$18   \$139.00   \$141.88   \$18.89     PPT CODE   28810   \$143.61   \$144.31   \$34.76   \$18   \$139.00   \$141.88   \$18.89     PPT CODE   28810   \$143.61   \$144.31   \$34.76   \$18   \$139.00   \$141.88   \$18.89     PPT CODE   28810   \$143.61   \$144.31   \$34.76   \$18   \$139.00   \$141.88   \$18.89     PPT CODE   28810   \$143.61   \$144.31   \$34.76   \$18   \$139.00   \$141.88   \$18.89     PPT CODE   28810   \$143.61   \$144.31   \$34.76   \$18   \$139.00   \$141.88   \$18.89     PPT CODE   28810   \$143.61   \$144.31   \$34.76   \$18   \$139.00   \$141.88   \$18.89     PPT CODE   28810   \$143.61   \$144.31   \$34.76   \$18   \$18.90   \$141.88   \$18.89     PPT CODE   288		21
ARG	100 00 100 100 100 100 100 100 100 100	18
EPT CODE 24105 1515.22 1518.33 834.85 14 8124.14 \$120.66 \$34.25  PPT CODE 27345 5163.97 9173.36 952.45 13 9129.40 9133.13 943.83  PPT CODE 25447 5162.21 9157.43 849.89 14 9125.67 9131.80 923.11  PPT CODE 26447 5162.21 9157.43 849.89 14 9125.67 9131.80 923.11  PPT CODE 26535 9162.34 9156.36 854.14 15 9140.60 9143.09 \$31.33  PPT CODE 26535 127.43 5125.79 930.73 16 9100.84 9100.69 \$29.94  PPT CODE 26455 127.43 5125.79 930.73 16 9100.84 9100.69 \$29.94  PPT CODE 26234 9139.74 9135.72 944.64 12 9159.95 913.80 946.45  PPT CODE 26255 1010.41 9101.82 950.26 28 996.53 995.62 923.85  PPT CODE 26265 1010.41 9101.82 950.26 28 996.53 995.62 923.85  PPT CODE 26265 1010.41 9101.82 950.26 28 996.53 995.62 923.85  PPT CODE 262680 \$109.41 9101.87 988.90 18 9168.17 917.95 963.93  PPT CODE 26860 \$200.16 9197.17 968.90 18 9168.17 917.15 963.93  PPT CODE 26800 \$143.61 9144.31 934.76 18 9139.00 9141.88 918.39		
CPT CODE 25447 \$183.97 \$173.36 \$52.45 13 \$129.40 \$133.13 \$43.83   APGS 70		14
PAPGS 70  PT CODE 25447 5162.21 5157.43 849.89 14 \$125.67 \$131.60 \$23.11 CPT CODE 25447 5162.24 \$156.38 \$54.14 15 \$140.80 \$143.09 \$31.33 CPT CODE 25535 \$162.34 \$156.38 \$54.14 15 \$140.80 \$143.09 \$31.33 CPT CODE 25535 \$162.34 \$156.38 \$54.14 15 \$140.80 \$143.09 \$31.33 CPT CODE 25455 \$127.43 \$125.79 \$30.73 16 \$100.84 \$100.89 \$29.94 CPT CODE 25234 \$139.74 \$135.72 \$44.64 12 \$159.85 \$139.80 \$46.45 APGS 72 \$100.84 \$100.89 \$29.94 CPT CODE 25255 \$109.41 \$101.82 \$50.26 28 \$96.53 \$95.50 \$46.45 APGS 73 \$100.84 \$100.89 \$35.35 APGS 73 \$100.84 APGS 74 APG	21100 1100 1100 1100 1100 1100 1100 110	12
PT CODE 25447 \$116.2.21 \$157.43 \$49.89 14 \$125.67 \$131.60 \$22.11 \$7.67 \$10.90 \$23.11 \$7.67 \$10.90 \$23.11 \$7.67 \$10.90 \$23.13 \$1.67 \$10.90 \$143.09 \$23.13 \$1.67 \$10.90 \$143.09 \$23.13 \$1.69 \$10.90 \$143.09 \$23.13 \$1.69 \$10.90 \$143.09 \$1.33 \$1.33 \$1.69 \$10.90 \$1.33 \$1.33 \$1.39 \$1.	2,010	
PFT CODE 26535 \$162.34 \$156.36 \$54.14 15 \$140.60 \$143.09 \$31.33 PFT CODE 26535 \$162.34 \$156.36 \$54.14 15 \$140.60 \$143.09 \$31.33 PFT CODE 26435 \$127.43 \$125.79 \$30.73 16 \$100.84 \$100.89 \$29.94 PFT CODE 26234 \$139.74 \$135.72 \$44.54 12 \$159.85 \$138.80 \$46.45 PFT CODE 26235 \$109.41 \$101.82 \$50.26 28 \$96.53 \$95.62 \$23.85 PFT CODE 26055 \$109.41 \$101.82 \$50.26 28 \$96.53 \$95.62 \$23.85 PFT CODE 26055 \$109.41 \$101.82 \$50.26 28 \$96.53 \$95.62 \$23.85 PFT CODE 26055 \$109.41 \$101.82 \$50.26 28 \$95.53 \$95.62 \$23.85 PFT CODE 26056 \$109.41 \$101.82 \$50.26 28 \$199.07 \$174.99 \$32.19 \$24 \$129.13 \$127.98 \$95.35 \$95.62 \$23.85 PFT CODE 26080 \$200.16 \$197.17 \$68.90 18 \$168.17 \$171.95 \$63.93 PFT CODE 26080 \$143.61 \$143.61 \$144.31 \$34.76 18 \$139.00 \$141.88 \$18.39 \$141.88 \$18.39 \$141.89 \$18.39 \$141.88 \$18.39 \$141.89 \$141.88 \$18.39 \$141.89 \$18.39 \$141.88 \$18.39 \$141.89 \$18.39 \$141.88 \$18.39 \$141.89 \$18.39 \$141.89 \$18.39 \$141.89 \$18.39 \$141.89 \$18.39 \$141.89 \$18.39 \$141.89 \$141.89 \$18.39 \$141.89 \$1	440 00 440 00 410 07 4121 00 422 11	7
APG 71  CPT-CODE 28255 9127.42 9125.79 830.73 16 9100.84 9100.69 829.94  CPT-CODE 28234 9139.74 9135.72 944.84 12 9159.85 9139.80 946.45  APG 72  CPT-CODE 28235 9109.41 9101.82 950.26 28 996.53 956.62 923.85  CPT-CODE 28285 9169.07 9174.99 932.19 24 9129.13 9127.98 935.55  CPT-CODE 28285 9109.41 9101.82 950.26 28 996.53 956.62 923.85  CPT-CODE 28285 9169.07 9174.99 932.19 24 9129.13 9127.98 935.35  CPT-CODE 28860 9200.16 9197.17 988.90 18 9188.77 9171.95 963.93  CPT-CODE 28810 9143.61 9144.31 934.76 18 9139.00 9141.88 918.39	55 4440 00 4440 00 621 22	9
CPT CODE         26455         \$127.43         \$125.79         \$30.73         16         \$100.84         \$100.69         \$28.94           CPT CODE         28234         \$139.74         \$135.72         \$44.64         12         \$159.85         \$139.80         \$46.45           ARGF         72         72         72         \$96.53         \$96.53         \$96.52         \$23.85         \$23.85         \$27.91         \$20.21         \$20.21         \$23.85         \$23.8	DC 2000 11023	
FOR CODE 28234 \$139.74 \$135.72 \$44.84 12 \$159.85 \$139.90 \$46.45 \$175.72 \$175.7		12
ARG 200 200 710.00 200.00 710.82 850.26 28 896.53 896.62 \$23.85 207 CODE 26055 \$109.41 \$101.82 \$50.26 28 \$96.53 \$95.62 \$23.85 207 CODE 26055 \$199.07 \$174.99 \$32.19 24 \$129.13 \$127.98 \$35.35 ARG 73 \$100.00 \$	20400 \$10000 \$10000 \$10000 \$10000 \$10000	7
PT CODE 26055 \$109.41 \$101.82 \$50.26 28 \$96.53 \$95.62 \$28.85 \$PT CODE 26055 \$109.41 \$101.82 \$50.26 28 \$96.53 \$95.62 \$23.85 \$PT CODE 26860 \$73\$ \$73\$ \$95.62 \$169.07 \$174.99 \$932.19 24 \$129.13 \$127.98 \$95.35 \$PT CODE 26860 \$200.16 \$197.17 \$68.90 18 \$168.17 \$171.95 \$63.93 \$PT CODE 26810 \$143.61 \$144.31 \$34.76 18 \$139.00 \$141.88 \$18.39 \$\$141.80 \$\$18.39 \$\$141.80 \$\$18.39 \$\$141.80 \$\$18.30 \$\$141.80 \$\$18.39 \$\$141.80 \$\$18.30 \$\$141.80 \$\$18.30 \$\$141.80 \$\$18.30 \$\$141.80 \$\$18.30 \$\$141.80 \$\$18.30 \$\$141.80 \$\$18.30 \$\$18.30 \$\$141.80 \$\$18.3	DE 20204 9100:14 110112	
PT CODE 2000 189.07 174.99 332.19 24 \$129.13 \$127.98 \$35.35 PT CODE 2680 \$200.16 \$197.17 \$66.90 18 \$168.17 \$171.95 \$63.93 PT CODE 26810 \$143.61 \$144.31 \$34.76 18 \$139.00 \$141.88 \$16.39	400 E2 400 E2 422 B5	19
PRODUCT 28810 \$143.61 \$144.31 \$34.76 18 \$139.00 \$141.88 \$18.39	DE 2000 0103.41 VIOLE 100.40 04 4400.42 4127.00 625.25	17
CPT CODE         26860         \$200.16         \$197.17         \$68.90         18         \$168.17         \$17.95         \$63.93           CPT CODE         28810         \$143.61         \$144.31         \$34.76         18         \$139.00         \$141.88         \$18.39		
CPT CODE 28810 \$143.61 \$144.31 \$34.76 18 \$139.00 \$141.88 \$18.39		12
CPT CODE 28810 V143.01 V143.0	DE 2000 V200.10 V107.11	8
	DE 28810 9143.01 91410.	
CPT CODE 23420 \$246.86 \$252.99 \$100.60 11 \$197.29 \$203.13 \$64.87	100 00 14 0107 20 020 020 020 020 020 020 020 020 02	11

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			1103	Standard			1	Standard	
SURGICAL		Mean	Median	Deviation	Count	Mean	Median	Deviation	Count
PROCEDURES	25260	\$186.16	\$169.60	\$53.20	14	\$151.93	\$143,78	\$53.31	12
CPT CODE		\$186.16	\$109.00	955.20	14	V101.00	V140170	100101	
APG#	75	44.00.00	\$185.58	\$61.72	12	\$202.06	\$198.65	\$13.76	4
CPT CODE	27332	\$189.00	\$185.58	\$49.97	11	\$203.63	\$207.37	\$17.31	4
CPT CODE	27333	\$154.77	\$128.85	\$49.97		7203.03	V207.07	417.01	
APG#	76		1440.54	\$26.20	6	\$81.41	\$94.49	\$37.70	6
CPT CODE	20550	\$107.62	\$113.54		12	\$109.70	\$111.99	\$21.16	- 5
CPT CODE	20605	\$136.96	\$139.71	\$60.85			\$128.06	\$27.43	5
CPT CODE	20610	\$132.50	\$124.69	\$53.28	11	\$123.78	\$128.06	\$27.43	
APG#	77		11105	040.07	- 11	NI A	N.A.	N.A.	
CPT CODE	92507	\$50.27	\$44.90	\$18.97	11	N.A.		N.A.	
CPT CODE	92508	\$39.97	\$42.03	\$7.14	3	N.A.	N.A.	N.A.	
APG#	79			12.00			A1 A	N A	
CPT CODE	94650	\$11.65	\$11.42	\$3.26	12	N.A.	N.A.	N.A.	
CPT CODE	94760	\$6.82	\$5.43	\$4.62	16	N.A.	N.A.	N.A.	
APG#	80								
CPT CODE	32000	\$107.13	\$100.29	\$54.68	11	\$133.24	\$133.24	N.A.	1
CPT CODE	32405	\$157.20	\$188.29	\$80.57	6	N.A.	N.A.	N.A.	
APG#	81								
CPT CODE	31505	\$105.28	\$102.63	\$47.64	12	\$103.81	\$95.28	\$35.50	6
CPT CODE	31510	\$110.50	\$106.13	\$43.66	14	\$124.08	\$99.32	\$57.45	6
APG#	82					1	1		
CPT CODE	31535	\$141.68	\$133.04	\$53.98	16	\$130.53	\$129.66	\$23.70	11
CPT CODE	31541	\$151.85	\$135.18	\$43.75	15	\$139.20	\$130.25	\$30.76	10
APG#	83								
CPT CODE	31622	\$122.84	\$112.01	\$37.16	29	\$122.94	\$118.64	\$44.41	8
CPT CODE	31625	\$124.42	\$118.96	\$32.60	30	\$127.60	\$136.59	\$26.73	4
APG#	84								
CPT CODE	31628	\$140.09	\$122.13	\$65.31	24	\$182.21	\$182.21	\$58.45	2
CPT CODE	31629	\$149.76	\$139.38	\$63.18	9	\$150.77	\$150.77	N.A.	1
APG#	85								
CPT CODE	30901	\$155.68	\$151.47	\$57.45	10	\$135.76	\$144.24	\$50.81	4
CPT CODE	30903	\$152.53	\$141.10	\$74.85	11	\$138.03	\$142.45	\$31.77	5
APG#	86	7.02.00	1.71.10					1	
	41110	\$152.43	\$132.20	\$51.94	12	\$122.10	\$117.94	\$33.78	6
CPT CODE		\$152.43	\$132.20	\$61.08	13	\$122.76	\$115.03	\$34.43	4
CPT CODE	41112	V149./3	V132.37	701.00	13	7.22.70	1	127140	
APG#	87	111010	\$133.68	\$41.49	8	\$137.70	\$135.15	\$42,42	4
CPT CODE	40500	\$146.42	\$133.68	\$80.42	13	\$185.43	\$168.49	\$66.93	5
CPT CODE	42410	\$250.06	\$278.08	900.42	13	V100.43	V.30.43	+00.00	-
APG#	88		4400.00	\$76.48	13	\$197.65	\$192.83	\$41.90	9
CPT CODE	31030	\$215.04	\$186.86	\$76.48	13	9137.00	9132.03	741.90	9

	DIAN, STAN	T		oitals				.C.s	
	-		1103	Standard		-		Standard	
PROCEDURES		Mean	Median	Deviation	Count	Mean	Median	Deviation	Count
	31200	\$204.31	\$214.29	\$65.20	12	\$189.04	\$180.50	\$35.53	10
CPT CODE	105	9204.31	V214.23	V00.20		1100101	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
APG#	93015	\$34.33	\$28.45	\$15,66	13	N.A.	N.A.	N.A.	
CPT CODE	93015	\$39.20	\$26.88	\$24.68	- 8	N.A.	N.A.	N.A.	
CPT CODE		\$39.20	\$20.00	\$24.00		N.A.	14.73	1100	
APG#	106	100.10	\$31,45	\$16.28	15	N.A.	· N.A.	N.A.	
CPT CODE	93307	\$32.18			14	N.A.	N.A.	N.A.	
CPT CODE	93320	\$16.15	\$16.91	\$6.41	14	IN.A.	N.A.	IV.A.	
APG#	108			1100.00	7	N.A.	N.A.	N.A.	
CPT CODE	92960	\$162.33	\$87.20	\$182.83				N.A.	
CPT CODE	93618	\$405.64	\$179.92	\$443.14	3	N.A.	N.A.	N.A.	
APG#	109					140044	1100 11	\$48,77	2
CPT CODE	36489	\$104.08	\$86.03	\$64.53	10	\$100.14	\$100.14		
CPT CODE	36860	\$116.99	\$125.87	\$29.40	4	N.A.	N.A.	N.A.	
APG#	110								
CPT CODE	93547	\$334.97	\$242.62	\$275.63	10	N.A.	N.A.	N.A.	
CPT CODE	93549	\$381.96	\$255.81	\$309.51	10	N.A.	N.A.	N.A.	
APG#	111								
CPT CODE	75963	\$110.79	\$95.75	\$58.09	15	N.A.	N.A.	N.A.	
CPT CODE	92982	\$519.11	\$465.20	\$252.80	7	N.A.	N.A.	N.A.	
APG#	112							1	
CPT CODE	33212	\$180.22	\$187.90	\$44.74	12	N.A.	N.A.	N.A.	
CPT CODE	33219	\$144.57	\$135.25	\$38.17	12	N.A.	N.A.	N.A.	
APG#	113								
CPT CODE	33216	\$138.89	\$120.26	\$49.23	9	N.A.	N.A.	N.A.	
CPT CODE	36497	\$139.06	\$140.15	\$83.23	11	\$108.07	\$121.72	\$50.56	7
APG#	114						T		
CPT CODE	35875	\$172.89	\$138.17	\$65.78	14	\$159.80	\$159.80	N.A.	- 1
CPT CODE	36495	\$178.18	\$158.83	\$72.31	15	\$131.71	\$142.13	\$51.89	6
APG#	115								
CPT CODE	37785	\$213,16	\$204.37	\$61,19	17	\$198.94	\$192.57	\$50.52	11
CPT CODE	37799	N.A.	N.A.	N.A.		\$176,17	\$176.17	N.A.	1
APG#	116	1400							
CI'T CODE	37618	\$207.26	\$210.44	\$72.91	10	N.A.	N.A.	N.A.	
CPT CODE	37650	\$201.36	\$179.61	\$86.28	10	N.A.	N.A.	N.A.	
	37720	\$201.30	\$195.91	\$63.95	14	\$158.37	\$168.43	\$49.80	12
APG#	117	V200.71	7155.51	100.00		1.30.07			
	31500	\$24.98	\$18.34	\$19.85	7	\$71.37	\$71.37	\$19.01	2
CPT CODE	92950	\$181.37	\$183.10	\$102.67	10	N.A.	N.A.	N.A.	
CPT CODE		9101.37	9103.10	¥102.07	- 10	14.A.	11.6.	1400.	
APG# CPT CODE	131 96501	\$102.28	\$97.29	\$64.06	7	N.A.	N.A.	N.A.	

				OUNT FOR			A.S	.C.s	
			HOS	Standard			7,10	Standard	
SURGICAL		Mean	Median	Deviation	Count	Mean	Median	Deviation	Count
ROCEDURES			\$109.66	\$81.35	6	N.A.	N.A.	N.A.	
CPT CODE	96509	\$119.50		\$104.54	5	N.A.	N.A.	N.A.	
CPT CODE	96510	\$145.72	\$145.53	\$104.54		IV.A.	14.75	14.71	
APG#	132		100 11	\$22,97	8	N.A.	N.A.	N.A.	
OPT CODE	96500	\$36.95	\$29.41		1	N.A.	N.A.	N.A.	
CPT CODE	96549	\$19.37	\$19.37	N.A.		IV.A.	14.75.	14.75.	
APG#	133			10000	8	\$45.38	\$45.38	N.A.	1
CPT CODE	36430	\$50.08	\$49.74	\$26.88		N.A.	N.A.	N.A.	
OPT CODE	36440	\$56.34	\$56.34	\$9.21	2	N.A.	N.A.	N.A.	
APG#	134						N.A.	N.A.	
CPT CODE	36455	\$49.83	\$49.83	N.A.	1	N.A.			
CPT CODE	36520	\$146.25	\$112.79	\$128.91	3	N.A.	N.A.	N.A.	
APG#	135					1100 5	4440.05	040.05	10
CPT CODE	38510	\$164.74	\$157.71	\$46.98	16	\$132.55	\$140.86	\$43.65	13
CPT CODE	38525	\$153.34	\$132.22	\$53.30	16	\$143.67	\$143.08	\$51.33	12
APG#	136								
PT CODE	95001	\$18.22	\$18.22	N.A.	1	N.A.	N.A.	N.A.	
APG#	157								
CPT CODE	91010	\$66.59	\$68.52	\$14.86	3	N.A.	N.A.	N.A.	
PT CODE	91030	\$44.51	\$44.51	\$7.52	2	N.A.	N.A.	N.A.	
APG#	158		1						
CPT CODE	43450	\$59.78	\$54.19	\$28.52	24	\$103.42	\$89.41	\$60.30	5
PT CODE	43451	\$62.55	\$61.46	\$24.81	20	\$86.08	\$90.03	\$45.29	6
APG#	159								
CPT CODE	47000	\$153.75	\$149.57	\$58.93	9	\$121.94	\$121.94	\$114.48	2
OPT CODE	49180	\$70,40	\$56.74	\$45.52	6	\$120.68	\$120.68	\$116.26	2
OPT CODE	91000	\$68,26	\$68.26	\$6.99	2	N.A.	N.A.	N.A.	
APG#	160								
CPT CODE	45300	\$61.06	\$52,15	\$32.73	10	\$65.68	\$66.37	\$33.29	4
OPT CODE	45330	\$60.49	\$52.52	\$31.59	25	\$79.46	\$84.61	\$31.67	13
CPT CODE	46610	\$71.01	\$58.15	\$47.75	12	\$98.84	\$84.61	\$35.71	5
APG#	161		120						
OPT CODE	45331	\$54.07	\$46,37	\$29.53	23	\$81.85	\$79.02	\$30.12	10
OPT CODE	45333	\$57.92	\$51.16	\$31.76	23	\$94.58	\$100,81	\$28.97	8
PG#	162	407.02	107.10						
	43235	\$79.58	\$76.54	\$19.63	24	\$89.04	\$86.91	\$43.52	12
PT CODE	43235	\$85.55	\$80.10	\$28.32	27	\$84.05	\$75.22	\$39.87	13
	163	903.55	700.10	V20.32	- 27	154.05	1,5122		- 10
APG#	43245	\$81.03	\$83.97	\$24.46	13	\$98.94	\$107.83	\$43.25	5
CPT CODE		\$105.69	\$107.39	\$31.03	14	\$104.98	\$92.54	\$29.23	5
CPT CODE APG#	164	9105.69	9107.39	431,03	14	7104.50	702.07	723.20	

MEAN, MEDIAN, STANDARD DEVIATION & COUNT FOR DIRECT LABOR COSTS - SURGICAL PROCEDURES

Count

25

Mean

\$91.85

\$102,16

\$96.29

\$100.93

Standard

Deviation

\$20.80

\$24.29

\$26.56 \$26.68

Hospitals

Median

\$95.02

\$88.06

\$101.19

\$82.70

Mean

\$89.04

\$95.00

\$107.81

\$90.71

45378

45380

165

45383

45385

184

50590

185

53660

53670

186

\$142.79

\$172.88

\$137.89

\$127.76

\$9.52

\$64.57 \$56.52 A.S.C.s

Median

\$77.53

\$102.78

\$100.81

\$101.79

\$215.46

\$201,17

\$117.36

\$10.58

N.A.

\$13.08

\$6.75

3

\$215.46

\$201,17

\$111,42

\$10.58

Standard

Deviation

\$39.29

\$41.87

\$39.34

\$41.60

Count

14

8

15

SURGICAL

CPT CODE

APG#

APG#

APG#

CPT CODE APG#

CPT CODE

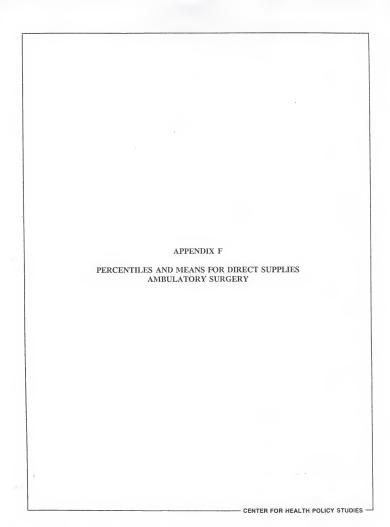
PROCEDURES

MEAN, ME	DIAN, STAN	DARD DEV			DIRECT	ABUR CUS			JUNES
			Hos	pitals			A.S	.C.s	
SURGICAL				Standard				Standard	
PROCEDURES		Mean	Median	Deviation	Count	Mean	Median	Deviation	Count
APG#	214								
CPT CODE	52500	\$163.10	\$146.61	\$62.78	16	\$144.50	\$134.54	\$61.24	5
CPT CODE	52601	\$195.71	\$191.82	\$72.62	13	\$252.35	\$252.35	N.A.	1
APG#	236								
CPT CODE	59025	\$28.83	\$28.83	N.A.	1	N.A.	N.A.	N.A.	
CPT CODE	59050	\$49.58	\$49.58	N.A.	1	N.A.	· N.A.	N.A.	
APG#	237								
CPT CODE	59801	\$114.24	\$104.48	\$48.98	10	\$89.58	\$97.93	\$24.70	9
CPT CODE	59820	\$125.89	\$130.54	\$36.54	13	\$95.15	\$97.96	\$31.57	15
APG#	238								
CPT CODE	59840	\$120.08	\$112.96	\$43.39	9	\$81.06	\$97.93	\$35.91	7
CPT CODE	59841	\$111.99	\$126.83	\$33.84	6	\$90.72	\$98.74	\$35.24	6
APG#	240								
CPT CODE	58980	\$172.39	\$168.05	\$37.42	21	\$137.86	\$132.39	\$49.96	19
CPT CODE	58985	\$174.59	\$170.54	\$48.00	18	\$157.66	\$136.55	\$73.31	17
APG#	241								
CPT CODE	57452	\$125.82	\$126.41	\$27.58	8	\$94.94	\$83.16	\$36.12	9
CPT CODE	57454	\$131.04	\$123.38	\$30.86	11	\$85.67	\$86.06	\$47.89	6
APG#	242								
CPT CODE	56600	\$140.19	\$139.27	\$37.63	15	\$112.14	\$115.87	\$36.66	13
CPT CODE	57520	\$127.12	\$123.38	\$30.51	17	\$114.32	\$119.36	\$32.08	21
APG#	243								
CPT CODE	57820	\$109.57	\$101.33	\$34.07	24	\$108.59	\$98.99	\$18.97	3
CPT CODE	58120	\$116.39	\$115.51	\$29.58	23	\$92,41	\$98.10	\$32.83	16
APG#	244	¥110.00	4110101	720100					
CPT CODE	56620	\$153.38	\$139.83	\$31.83	9	\$131.74	\$135,92	\$44.97	7
CPT CODE	57135	\$147.74	\$146.14	\$30.94	14	\$118,71	\$122.55	\$43.05	12
APG#	261	V147.74	V140.14	+00101		1110111			
CPT CODE	95819	\$41.29	\$40,11	\$13.18	17	N.A.	N.A.	N.A.	
	95828	\$392.33	\$410.70	\$100.58	6	N.A.	N.A.	N.A.	
OPT CODE	262	4302.33	V410.70	7.00.00		- COM			
APG# CPT CODE	90870	\$33.76	\$33.76	\$12.45	2	N.A.	N.A.	N.A.	
	90870	\$33.76	\$26,41	N.A.	1	N.A.	N.A.	N.A.	
C. T CODE	263	920.41	720.41	11.74.		14161			
ARG#		\$4.78	\$4.78	\$2,28	5	N.A.	N.A.	N.A.	
CPT CODE	95900		\$4.78	\$12.43	8	N.A.	N.A.	N.A.	
CPT CODE	95904	\$15.56	\$10.66	912.43		IV.A.	14.74.	11.74.	
APG#	264	474.00	040.04	\$52.55	7	\$31.72	\$29.66	\$22.35	7
CPT CODE	62278	\$71.28	\$43.34			\$52.68	\$56.47	\$30.50	- 6
CPT CODE	62289	\$88.83	\$48.23	\$73.58	3	952.68	900.47	030.50	
APG#	265					1			

IVILATE, IVIL	DIAIT, OTAI	DAILD DEV		OUNT FOR	D111201 E	1		.C.s	001100
			· Hos	Standard			A.S	Standard	
SURGICAL			24. 4			Mean	Madian		Count
PROCEDURES		Mean	Median	Deviation	Count		Median	Deviation	Count
CPT CODE	62225	\$28.03	\$28.03	N.A.	1	N.A.	N.A.	N.A.	
CPT CODE	63744	\$162.92	\$162.92	\$71.83	2	N.A.	N.A.	N.A.	
APG#	266								
CPT CODE	64510	\$88.99	\$85.63	\$62.00	4	\$35.51	\$26.87	\$24.68	9
CPT CODE	64520	\$96.42	\$88.98	\$65.65	7	\$27.21	\$23.03	\$22.25	5
APG#	267								
CPT CODE	63660	\$136.16	\$135.91	\$24.17	3	\$108.19	\$108.19	N.A.	1
CPT CODE	63688	\$139.44	\$142.60	\$20.80	4	\$107.50	\$107.50	N.A.	1
APG#	268								
CPT CODE	63650	\$214.44	\$214.44	\$6.81	2	N.A.	N.A.	N.A.	
CPT CODE	64560	\$219.25	\$219.25	N.A.	1	\$217.41	\$217.41	N.A.	1
APG#	269								
CPT CODE	64721	\$139.97	\$135.81	\$29.83	24	\$116.71	\$111.40	\$41.23	20
APG#	270								
CPT CODE	64718	\$179.72	\$164.37	\$53.10	13	\$156.13	\$133.13	\$58.19	11
CPT CODE	64719	\$180.11	\$163.71	\$64.02	13	\$143.59	\$138.58	\$47.50	10
APG#	271								
CPT CODE	64831	\$204.25	\$184.27	\$80.15	11	\$163.29	\$165.97	\$50.59	6
CPT CODE	64834	\$190.33	\$184.27	\$37.66	9	\$152.91	\$156.71	\$26.93	6
APG#	272								
CPT CODE	62270	\$59.51	\$43.39	\$44.14	9	N.A.	N.A.	N.A.	
CPT CODE	62272	\$34.43	\$18.86	\$32.36	3	N.A.	N.A.	N.A.	
APG#	287								
CPT CODE	92235	\$6.16	\$6.16	N.A.	1	N.A.	N.A.	N.A.	
APG#	289								
CPT CODE	65855	\$110.11	\$122.09	\$46,42	10	\$19.68	\$19.20	\$2.53	3
CPT CODE	66821	\$149.73	\$163.00	\$34.14	12	\$76.70	\$72.88	\$59.88	12
APG#	290								
CPT CODE	67105	\$126.44	\$149.49	\$80.20	3	\$127.75	\$125.27	\$89.24	4
CPT CODE	67228	\$84.91	\$59.56	\$74.37	4	\$16.29	\$19.20	\$7.99	3
APG#	291	70.101							
CPT CODE	66850	\$130.65	\$118.23	\$59.35	19	\$116.13	\$109.02	\$50.63	9
C'T CODE	66940	\$117.53	\$104.97	\$70.02	16	\$99.58	\$102.97	\$38.77	10
CPT CODE	66983	\$182.70	\$177.46	\$55.86	18	\$110.04	\$113.76	\$33.51	10
CPT CODE	66984	\$183.79	\$172.24	\$59.25	22	\$113.67	\$119.70	\$44.13	23
CPT CODE	66985	\$119.36	\$110.66	\$46.54	20	\$85.98	\$94.55	\$32.19	18
APG#	292	7113.00	2110.00	770.57		400.00	757.55	702.10	10
CPT CODE	66500	\$133.18	\$128.35	\$37.64	5	\$90.47	\$107.56	\$48.23	4
CPT CODE	66720	\$134.10	\$134.10	\$9.69	2	\$75.82	\$79.55	\$34.77	5
APG#	293	7104.10	.104.10	70.00		770102	770.00	704.77	

MEAN, ME	DIAN, STAN	IDARD DEV			DIRECT	ABOR COS			DURES
			Hos	pitals			A.5	S.C.s	
SURGICAL				Standard				Standard	
PROCEDURES		Mean	Median	Deviation	Count	Mean	Median	Deviation	Count
CPT CODE	66150	\$149.36	\$160.53	\$36.89	3	\$97.50	\$109.18	\$32.51	3
CPT CODE	66170	\$160.89	\$166.75	\$22.86	7	\$111.35	\$122.09	\$44.45	10
APG#	294								
CPT CODE	65450	\$91.33	\$85.08	\$32.52	3	\$78.93	\$84.64	\$43.44	4
CPT CODE	66820	\$141.13	\$151.70	\$49.59	5	\$94.55	\$108.78	\$39.25	4
APG#	295								
CPT CODE	66625	\$146.43	\$157.82	\$39.19	4	\$80.09	\$84.61	\$41.34	9
CPT CODE	66830	\$127.04	\$119.57	\$34.26	8	\$148.56	\$148.56	N.A.	1
APG#	296					1			
CPT CODE	65750	\$96.23	\$96.23	\$42.85	2	\$136.35	\$151.26	\$59.01	12
CPT CODE	67010	\$163.59	\$173.79	\$49.39	10	\$104.60	\$120.26	\$48.54	8
APG#	297								
CPT CODE	67208	\$119.57	\$138.08	\$83.83	3	N.A.	N.A.	N.A.	
CPT CODE	67227	\$133.67	\$133.67	\$83.33	2	\$76.56	\$76.56	\$69.29	2
APG#	298								
CPT CODE	67036	\$223.12	\$184.42	\$139.38	6	\$160.91	\$137.59	\$96,74	8
CPT CODE	67101	\$225.96	\$192.60	\$97.52	3	\$129.63	\$127.00	\$23.40	3
APG#	299							1	-
CPT CODE	67311	\$197.12	\$176.96	\$61.34	9	\$124.07	\$126.07	\$41.28	15
CPT CODE	67312	\$162.63	\$172.55	\$39.81	9	\$121.06	\$126.94	\$45.47	20
APG#	300			-	-				
CPT CODE	67840	\$158.36	\$170.92	\$37.32	8	\$85.11	\$82.80	\$37.66	11
CPT CODE	67921	\$153.50	\$161.61	\$40.47	10	\$96.39	\$102.44	\$36.33	14
APG#	301								
CPT CODE	67904	\$172.37	\$172,55	\$47.61	9	\$122.46	\$127.67	\$58.10	15
CPT CODE	68720	\$218.80	\$200,23	\$54.54	9	\$157.13	\$152.92	\$59.00	11
APG#	313		1				1102102	100,00	
CPT CODE	92545	\$38.56	\$38.56	N.A.	1	N.A.	N.A.	N.A.	
CPT CODE	92585	\$55.84	\$56.05	\$29.87	7	N.A.	N.A.	N.A.	
APG#	314						110	74.54	
OPT CODE	69140	\$140.37	\$133.47	\$32.32	6	\$158.69	\$145.87	\$30.99	3
OPT CODE	69310	\$172.09	\$126.80	\$90.27	7	\$200.17	\$200.17	\$12.23	2
CG#	315	1114100	***************************************	TOULE		4200117	4200117	TILLED	
CET CODE	69420	\$101.61	\$97.88	\$30.62	13	\$89.72	\$90.38	\$26,80	11
PT CODE	69433	\$90.54	\$99.90	\$27.45	9	\$67.83	\$66.92	\$32.53	11
APG#	316	+55.54	+55.50	727,140		407.03	700.52	V34.33	
PT CODE	69631	\$196.37	\$192.23	\$60.17	11	\$194.02	\$180.56	\$60.48	8
PT CODE	69660	\$225.30	\$206.74	\$92.97		\$263.49	\$263.94	\$95.03	4
APG#	317	7220.00	7200.74	432.31		7203.49	7203.34	430.03	*
CPT CODE	69806	\$138.56	\$128.32	\$32.79	3	N.A.	N.A.	N.A.	

		Hospitals				A.S.C.s				
SURGICAL				Standard				Standard		
PROCEDURES		Mean	Median	Deviation	Count	Mean	Median	Deviation	Count	
CPT CODE	69840	\$112.12	\$112.12	N.A.	1	\$36.66	\$36,66	N.A.	1	
APG#	318						100.00	14.0.		
CPT CODE	92557	\$46.12	\$45.23	\$16.96	5	N.A.	N.A.	N.A.		
CPT CODE	92567	\$16.42	\$7.71	\$15.78	5	N.A.	N.A.	N.A.		
APG#	319						14.71	14.0.		
CPT CODE	69210	\$84.87	\$89,42	\$43.16	6	\$76.03	\$81.15	\$12.46		



		MEAN, MEDIAN, & STANDARD DEVIATION FOR SUPPLY COSTS - SUI		Hospitals A.S.C.s					
			Standard				Standard		
SURGICAL			Mean	Median	Deviation	Mean	Median	Deviation	
PROCEDURES		APG & CPT DESCRIPTION	iviean	Wiediaii	Deviation	Widaii	HIGGIGH	DOTIGUIO	
APG#		SUPERFICIAL NEEDLE BIOPSY & ASPIRATION	\$22.67	\$18.85	\$14.44	\$33.78	\$19,01	\$33.79	
CPT CODE		Puncture Aspiration of Cyst of Breast		\$56.47	\$15.00	\$58.47	\$73.53	\$46.77	
CPT CODE		Biopsy of breast, needle (separate procedure)	\$60.13			\$103.84	\$103.84	N.A.	
CPT CODE	60100	Biopsy, thyroid, percutaneous needle	\$54.95	\$54.95	\$0.21	\$103.04	9103.04	N.A.	
APG#	3	SIMPLE INCISION & DRAINAGE				470.44	\$70,65	\$23.98	
CPT CODE	10000	Incision and drainage of infected or noninfected sebaceous cyst	\$63.80	\$64.52	\$13.03	\$79.41			
CPT CODE	10060	Incision and drainage of abscess (e.g., carbuncle)	\$68.82	\$67.86	\$19.79	\$79.29	\$73.77	\$30.04	
CPT CODE	10120	Incision & removal of foreign body subcutaneous tissues; simple	\$69.18	\$68.98	\$19.83	\$79.12	\$73.66	\$20.49	
APG#	4	COMPLEX INCISION AND DRAINAGE							
CPT CODE	10141	Incision and drainage of hematoma; complicated	\$93.63	\$91.04	\$34.19	\$90.80	\$93.69	\$14.80	
CPT CODE		Incision and drainage, complex, post-operative wound infection	\$87.34	\$87.97	\$23.66	\$83.03	\$84.61	\$19.48	
CPT CODE	23931	Incision and drainage, upper arm or elbow area; infected bur	\$91.15	\$91.37	\$22.75	\$104.07	\$94.54	\$36.96	
CPT CODE	28002	Deep dissection below fascia, for deep infection of foot, with(out) tendon sheath involvement; single	\$95.44	\$83.12	\$43.04	\$76.33	\$78.49	\$37.93	
APG#	5	COMPLEX INCISION AND DRAINAGE							
CPT CODE		Debridement of nails, manual; five or less	\$41.10	\$39.88	\$16.88	\$57.20	\$53.61	\$20.07	
CPT CODE		Debridement of nails, manual each additional; five or less	\$40.48	\$35.57	\$16.55	\$58.66	\$61.62	\$22.52	
APG#	6	SIMPLE DEBRIDEMENT & DESTRUCTION							
CPT CODE		Debridement of skin, partial thickness	\$72.87	\$68.49 -	\$14.70	\$77.54	\$74.33	\$17.88	
CPT CODE		Avulstion of nail plate, partial or complete, simple; single	\$55.39	\$43.47	\$29.84	\$69.29	\$60.14	\$33.31	
	17730	Destruction by any method, with or without surgical curettement	\$66.52	\$58.69	\$21.63	\$67.85	\$50.74	\$26.64	
CPT CODE	20670	Removal of implant superficial, (e.g., buried wire, pin or rod	\$87.16	\$85.98	\$36.68	\$92.94	\$80.58	\$29.73	
	7	SIMPLE EXCISION & BIOPSY							
APG#		Excision, benign lesion, except skin tag, trunk, arms or leg	\$66.94	\$66,73	\$8.87	\$88.13	\$88.49	\$21.54	
CPT CODE	11401	Excision, other benign lesion (unless listed elsewhere); face, ears, eyelids, nose, lips, mucous membr		\$56,13	\$17.60	\$73.42	\$74.34	\$20.67	
CPT CODE	11440	Excision, other benign lesion (unless listed elsewhele), lace, ears, eyellos, hose, hose, hose whele Excision, malignant lesion; trunk, arms or legs; lesion diameter .6 - 1.0 cm	\$64.75	\$62.98	\$15.59	\$90.41	\$87.57	\$22.77	
CPT CODE	11601	Excision, malignant lesion; trunk, arms or legs; lesion dameter .0 * 1.0 cm	\$66.39	\$66.58	\$13.99	\$90.08	\$88.95	\$22.59	
CPT CODE		Excision, malignant lesion, face, ears, eyelids, nose, lips;	V00.33	¥00.00	410100	100100	100.01	1	
APG#	8	COMPLEX EXCISION, 8IOPSY & DEBRIDEMENT	\$66.79	\$64.77	\$11.85	\$84,99	\$77.38	\$25.46	
CPT CODE		Excision, benign lesion, except skin tag (unless listed else	\$67.16	\$65.68	\$11.50	\$82.83	\$81.02	\$19.71	
CPT CODE		Excision, benign lesion, except skin tag (unless listed else	\$66.34	\$63.50	\$16.41	\$87.97	\$92.67	\$26.9	
CPT CODE		Excision, malignant, lesion, face, ears, eyelids, nose, lips	\$66.34	\$63.50	\$10.41	907.37	932.07	920.3	
APG#	9	LIPECTOMY & EXCISION WITH RECONSTRUCTION	101.00	477.07	\$51.82	\$136.96	\$114.21	\$80.5	
CPT CODE		Excision, excessive skin and subcutaneous tissue	\$91.66	\$77.97	\$20.99	\$103.52	\$109.65	\$26.8	
CPT CODE	15972	Excision, leg pressure ulcer, with local skin flap(s)	\$87.72	\$87.16		\$103.52	\$109.65	\$43.2	
CPT CODE	37735	Ligation and division and completion of strip, of long or short saphenous veins with radical excision of	\$111.06	\$106.01	\$23.47	\$126.53	\$113.59	943.2	
APG#	10	SIMPLE SKIN REPAIR					100.00	\$21.6	
CPT CODE	12001	Simple repair of superficial wounds of scalp, neck, axillae	\$53.00	\$50.74	\$16.36	\$76.52	\$75.96		
CPT CODE ·	12002	Simple repair of superficial wounds of scalp, neck, axillae,	\$59.40	\$54.64	\$23.31	\$75.84	\$72.36	\$20.3	
CPT CODE	12031	Layer closure of wounds of scalp axillae, trunk and/or extremities (excluding hands and feet); 2.5cm	\$64.75	\$66.81	\$19.68	\$77.99	\$75.64	\$17.3	
APG#	11	COMPLEX SKIN REPAIR							
CPT CODE		Simple repair or superficial wounds of face, ears, eyelids,	\$62.37	\$58.83	\$21.38	\$75.17	\$66.16	\$25.7	
CPT CODE	12017	Simple repair or superficial wounds of face, ears, eyelids,	\$61.65	\$60.56	\$19.92	\$77.91	\$69.95	\$28.7	
CPT CODE	12054	Layer closure of wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.5cm or less	\$65.93	\$61.91	\$22.54	\$73.89	\$72.67	\$14.8	
CPT CODE		Blepharoplasty, upper cyclid	\$63.52	\$62.22	\$15.79	\$77.41	\$82.89	\$26.8	
APG#	12	SKIN & INTEGUMENT GRAFT, TRANSFER & REARRANGEMENT							
CPT CODE	14060	Adjacent tissue transfer or rearrangement, eyelids, nose, ears and/or lips; defect 10 sq. cm or less	\$82.33	\$77.49	\$20.26	\$96.61	\$80.44	\$37.0	
CPT CODE	15100	Split graft, trunk, scalp, arms, legs, hands, and/or feet; 1	\$132.65	\$131.32	\$25.68	\$131.27	\$125.26	\$31.7	
	15200	Full thickness graft, free, including direct closure of donor	\$94.68	\$90.89	\$23.10	\$107.11	\$100.90	\$32.65	
CPT CODE APG#		SIMPLE INCISION & EXCISION OF BREAST				1		T	

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		MEAN, MEDIAN, & STANDARD DEVIATION FOR SUPPLY COSTS - SU						
			Hospitals		A.S.C.s			
SURGICAL					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
CPT CODE	28270	Capsulotomy for contracture; metatarso-phalangeal joint, with(out) tenorrhaphy, single, joint, each jo	\$94.96	\$92.14	\$36.09	\$96.26	\$96.06	\$19.18
APG#	67	BUNION PROCEDURES						
CPT CODE	28290	Hallux valgus (bunion) correction, with or without sesamoidectomy; simple exostectomy (Silver type	\$120.62	\$78.33	\$92.50	\$124.99	\$112.19	\$39.57
CPT CODE	28292	Hallux valgus (bunion) correction, with or without sesamoidectomy; simple exostectomy (Keller, Mcb	\$91.02	\$71.98	\$49.04	\$114.63	\$110.04	\$28.53
APG#	68	EXCISION OF 80NE, JOINT & TENDON OF THE HAND & FOOT						100.05
CPT CODE	26160	Excision or lesion of tendon sheath or capsule (e.g., cyst, mucous cyst, ganglion), hand or finger	\$74.11	\$62.58	\$34.29	\$79.68	\$72.63	\$28.35
CPT CODE	28080	Excision of interdigital (Morton) neuroma, single, each	\$80.94	\$81.21	\$17.00	\$100.80	\$91.42	\$32.56
APG#	69	EXCISION OF 80NE , JOINT & TENDON EXCEPT HAND & FOOT						
CPT CODE		Excision, olecranon bursa	\$85.31	\$83.68	\$22.98	\$99.82	\$100.19	\$29.60
CPT CODE	27345	Excision of synovial cyst of popiteal space (Baker's cyst)	\$91.39	\$88.59	\$23.53	\$97.99	\$97.28	\$20.10
APG#	70	ARTHROPLASTY						
CPT CODE	25447	Interposition arthroplasty, intercarpal or carpometacarpal joints	\$111.42	\$106.70	\$33.21	\$128.30	\$115.07	\$31.36
CPT CODE	26535	Arthroplasty interphalangeal joint; single, each	\$107.49	\$105.83	\$33.78	\$123.31	\$114.61	\$48.15
APG#	71	HAND & FOOT TENOTOMY						100.05
CPT CODE		Tenotomy, flexor, single, finger open, each	\$70.44	\$70.54	\$12.64	\$80.04	\$72.48	\$30.85
CPT CODE	28234	Tenotomy, open, extensor, foot or toe	\$74.11	\$75.18	\$15.46	\$91.17	\$79.92	\$30.88
APG#	72	SIMPLE HAND & FOOT REPAIR EXCEPT TENOTOMY						101.10
CPT CODE	26055	Tendon sheath incision for trigger finger	\$93.60	\$92.73	\$27.59	\$87.69	\$87.17	\$21.15
CPT CODE		Hammertoe operation, one tow (e.g., interphalangeal fusion, filleting, phalangectomy)	\$171.50	\$157.40	\$64.00	\$110.33	\$115.00	\$27.34
APG#		COMPLEX HAND & FOOT REPAIR						
CPT CODE		Arthrodesis, interphalangeal joint; with or w/o internal fix	\$97.85	\$87.41	\$41.16	\$107.24	\$104.86	\$46.35
CPT CODE	28810	Amputation, metatarsal, with toe, single	\$90.74	\$75.48	\$47.87	\$89.64	\$80.71	\$37.90
APG#		REPAIR, EXCEPT ARTHROTOMY, OF BONE, JOINT, TENDON EXCEPT OF HAND & FOOT						
CPT CODE		Repair of complete shoulder (rotator) cuff avulsion, chronic	\$146.29	\$146.08	\$36.53	\$182.44	\$172.41	\$63.26
CPT CODE		Repair, tendon or muscle, flexor, forearm and/or wrist; prim	\$88.40	\$82.61	\$27.99	\$105.41	\$98.39	\$53.75
APG#	75	ARTHROTOMY EXCEPT OF HAND & FOOT						
CPT CODE	27332	Arthrotomy, knee, for excision of semilunar cartilage (meniscectomy); medial or lateral	\$141.87	\$117.90	\$78.78	\$120.25	\$123.94	\$26.39
CPT CODE	27333	Arthrotomy, knee, for excision of semilunar cartilage (meniscectomy); medial and lateral	\$129.78	\$97.27	\$82.19	\$118.03	\$119.25	\$26.98
APG#		ARTHROCENTESIS & LIGAMENT OR TENDON INJECTION						1
CPT CODE	20550	Injection, tendon sheath, ligament, trigger points or ganglion cyst	\$44.76	\$51.57	\$25.00	\$65.37	\$70.91	\$40.49
CPT CODE		Arthrocentesis, aspiration and/or injection; intermediate joint, bursa or ganglion cyst	\$42.91	\$37.60	\$16.48	\$63.20	\$44.48	\$51.47
CPT CODE	20610	Arthrocentesis, aspiration and/or injection; major joint or bursa	\$39.76	\$31.90	\$15.88	\$50.43	\$37.49	\$37.96
APG#	77	SPEECH THERAPY						
CPT CODE	92507	Speech, language or hearing therapy, with continuing medical supervision; group	\$5.41	\$5.00	\$3.23	N.A.	N.A.	N.A.
CPT CODE	92508	Speech, language or hearing therapy, with continuing medical supervision; individual	\$0.49	\$0.49	\$0.68	N.A.	N.A.	N.A.
APG#	79	PULMONARY TEST & THERAPY EXCEPT SPIROMETRY			1			-
CPT CODE		Intermittent positive pressure breathing (IPP8) treatment, a	\$2.41	\$1.68	\$1.89	N.A.	N.A.	N.A.
CPT CODE	94760	Noninvasive ear or pulse oximetry for oxygen saturation; sin	\$8.48	\$9.06	\$6.33	N.A.	N.A.	N.A.
APG#	80	NEEDLE & CATHETER BIOPSY, ASPIRATION, LAVAGE & INTUBATION						
CPT CODE	32000	Thoracentesis, puncture or pleural cavity for aspiration, in	\$87.29	\$75.15	\$49.59	\$91.96	\$91.96	N.A.
CPT CODE	32405	Siopsy, lung or mediastinum, percutaneous needle	\$49.77	\$53.67	\$17.23	N.A.	N.A.	N.A.
APG#	81	SIMPLE ENDOSCOPY OF THE UPPER AIRWAY						
CPT CODE	31505	Laryngoscopy, indirect (separate procedure); diagnostic	\$37.68	\$35.07	\$12.37	\$61.65	\$63.41	\$30.80
CPT CODE		Laryngoscopy, indirect (separate procedure) with biopsy	\$41.66	\$37.23	\$13.61	\$61.28	\$67.82	\$26.93
APG#	82	COMPLEX ENDOSCOPY OF THE UPPER AIRWAY						
CPT CODE	31535	Laryngoscopy, direct, operative with biopsy	\$43.46	\$39.85	\$18.24	\$49.69	\$47.26	\$19.64
CPT CODE	31541	Laryngoscopy, direct, operative, with excision of tumor, w/o	\$46.95	\$47.10	\$12.55	\$49.77	\$45.77	\$23.72
APG#	83	SIMPLE ENDOSCOPY OF THE LOWER AIRWAY						

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						A.	PPENDIX	. F	
		MEAN, MEDIAN, & STANDARD DEVIATION FOR SUPPLY COSTS - SU	RGICAL I	PROCEDUR	RES	A.S.C.s			
	+			nospitais	Standard		A.3.0.3	Standard	
SURGICAL	-	ADD A COT DECONOTION	Mean	Median	Deviation	Mean	Median	Deviation	
PROCEDURES		APG & CPT DESCRIPTION	\$72.06	\$74.38	\$22.09	\$83.48	\$73.18	\$29.49	
CPT CODE		Bronchoscopy diagnostic, (flexible or rigid), w/ or w/o cell	\$72.40	\$64.29	\$26.41	\$55.74	\$51.07	\$19.50	
CPT CODE		Bronchoscopy with biopsy	\$ /2.40	\$64.29	\$26.41	\$55.74	\$51.07	\$19.50	
APG#		COMPLEX ENDOSCOPY OF THE LOWER AIRWAY					\$102,01	\$19.47	
CPT CODE		Bronchoscopy w/ transbronchial lung biopsy w/ or w/o fluoroscopic guidance	\$111.54	\$104.63	\$41.33	\$102.01			
CPT CODE	31629	Bronchoscopy with transbronchial needle aspiration biopsy	\$108.04	\$113.33	\$38.91	\$115.87	\$115.87	N.A.	
APG#	85	NASAL CAUTERIZATION & PACKING							
CPT CODE		Control nasal hemorrhage, anterior, simple (cauterization);	\$69.31	\$67.35	\$16.45	\$72.28	\$74.76	\$17.00	
CPT CODE	30903	Control nasal hemorrhage, anterior, complex (cauterization w	\$68.10	\$66.43	\$17.79	\$78.67	\$83.15	\$18.99	
APG#	86	SIMPLE LIP, MOUTH & SALIVARY GLAND PROCEDURES						-	
CPT CODE	41110	Excision of lesion of tongue without closure	\$62.91	\$62.75	\$6.27	\$56.36	\$56.59	\$10.77	
CPT CODE	41112	Excision of lesion of tongue with closure; anterior two-thirds	\$67.50	\$63.93	\$8.80	\$57.39	\$54.27	\$12.63	
APG#	87	COMPLEX LIP, MOUTH, & SALIVARY GLAND PROCEDURES			L	1			
CPT CODE	40500	Vermilionectomy (lip shave), mucosal advancement	\$68.88	\$67.63	\$12.88	\$50.41	\$52.24	\$6.95	
CPT CODE		Excision of parotid tumor or parotid gland; lateral lobe, w/	\$97.40	\$97.83	\$27.31	\$83.13	\$81.13	\$11.87	
APG#	88	MISCELLANEOUS SINUS, TRACHEAL & LUNG PROCEDURES							
CPT CODE	31030	Sinusotomy, maxillary (antrotomy); radical (Caldwell-Luc) with removal of antrochoanal polyps	\$82.40	\$75.68	\$30.11	\$94.19	\$93.93	\$23.76	
CPT CODE		Ethmoidectomy intranasal, anterior	\$78.07	\$73.57	\$22.07	\$81.10	\$77.51	\$21.47	
APG#	105	EXERCISE TOLERANCE TESTS							
CPT CODE		Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise; continuous ele	\$6.84	\$7.00	\$4.13	N.A.	N.A.	N.A.	
CPT CODE		Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise; continuous ele		\$3.16	\$1.53	N.A.	N.A.	N.A.	
APG#		ECHOCARDIOGRAPHY							
CPT CODE		Echocardiography, real-time with image documentation (2D) with or without M-mode recording; com	\$11.03	\$6.22	\$12.43	N.A.	N.A.	N.A.	
CPT CODE		Doppler echocardiography, pulsed wave and/or continuous wave with spectral display; complete	\$9.86	\$5.79	\$11.60	N.A.	N.A.	N.A.	
APG#		CARDIAC ELECTROPHYSIOLOGIC TESTS							
CPT CODE		Cardioversion, elective, electrical conversion of arrhythmia, external	\$41.90	\$28.73	\$34.41	N.A.	N.A.	N.A.	
CPT CODE		Induction of arrhythmia by electrical pacing	\$317,55	\$334.09	\$200.29	N.A.	N.A.	N.A.	
APG#		VASCULAR CANNULATION WITH NEEDLE & CATHETER							
CPT CODE		Placement of central venous catheter (subclavian, jugular, or other vein), percutaneous, over age 2	\$167.79	\$132.85	\$134.52	\$76.47	\$76.47	\$17.70	
CPT CODE		Cannula declotting without balloon catheter	\$98.48	\$105.73	\$33.99	N.A.	N.A.	N.A.	
APG#		DIAGNOSTIC CARDIAC CATHETERIZATION	100110	1100110	100.00				
		Combined left heart catheterization, selective coronary angiography, one or more coronary arteries, a	\$261.81	\$193.87	\$208.10	N.A.	N.A.	N.A.	
CPT CODE		Combined right and left heart catheterization, selective coronary angiography, one or more coronary	\$338.56	\$304.66	\$214.67	N.A.	N.A.	N.A.	
CPT CODE			V330.30	V304.00	V214.07	14.75.	14.75.	141741	
APG#		ANGIOPLASTY & TRANSCATHETER PROCEDURES	\$170.87	\$139.71	\$118.18	N.A.	N.A.	N.A.	
CPT CODE		Percutaneous transluminal angioplasty, any method, peripheral artery	\$798.05	\$634.74	\$650.13	N.A.	N.A.	N.A.	
CPT CODE		Percutaneous transluminal coronary balloon angioplasty; single vessel	\$790.00	9034.74	\$650.13	IV.A.	IV.A.	14.74.	
APG#		PACEMAKER INSERTION & REPLACEMENT	\$144.11	\$147.64	\$41,35	N.A.	N.A.	N.A.	
CPT CODE		Insertion or replacement of pacemaker pulse generator or AID	\$157.05	\$147.64	\$40.18	N.A.	N.A.	N.A.	
CPT CODE		Repair of pacemaker with replacement of pulse generator	\$157.05	\$149.40	\$40.10	N.A.	N.A.	IV.A.	
APG#		REMOVAL & REVISION OF PACEMAKER & VASCULAR DEVICE		10010	100.01			A1 A	
CPT CODE		Insertion, replacement, or repositioning of permanent transvenous electrodes only (15 days of more	\$112.56	\$92.16	\$99.91	N.A.	N.A.	N.A.	
CPT CODE		Removal of implantable intravenous infusion pump or venous a	\$64.70	\$58.25	\$28.41	\$73.32	\$64.80	\$33.54	
APG#		MINOR VASCULAR REPAIR & FISTULA CONSTRUCTION							
CPT CODE		Thrombectomy and/or repair of arterial or venous graft	\$244.44	\$200.87	\$168.83	\$187.56	\$187.56	N.A.	
CPT CODE		Insertion of implantable intravenous infusion pump or venous	\$132.54	\$117.46	\$92.42	\$125.82	\$134.91	\$35.56	
APG#		SECONDARY VARICOSE VEINS & VASCULAR INJECTION							
CPT CODE		Ligation, division, and/or excision of secondary varicose veins (clusters), one leg	\$100.69	\$100.76	\$19.62	\$119.89	\$108.99	\$61.90	
CPT CODE		Unlisted procedure, vascular surgery	N.A.	N.A.	N.A.	\$71.06	\$71.06	N.A.	
APG#	116	VASCULAR LIGATION							

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		MEAN, MEDIAN, & STANDARD DEVIATION FOR SUPPLY COSTS - SU		Hospitals			A.S.C.s	
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SURGICAL PROCEDURES	-	APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviatio
	07040	Ligation, major artery (e.g., post-traumatic, rupture); extremity	\$180.00	\$92.98	\$266,43	N.A.	N.A.	N.A.
CPT CODE	37618	Interrupting, partial or complete, or femoral vein, by ligature, intravascular device	\$98.99	\$95.64	\$40.45	N.A.	N.A.	N.A.
CPT CODE	37650	Ligation and division and complete stripping of long or short saphenous veins	\$105.03	\$102.85	\$22.64	\$108.47	\$103.34	\$29.09
CPT CODE		CARDIOPULMONARY RESUSCITATION & INTUBATION	¥100.03	\$102.00	722.04	V100.47	V100.04	V20.00
APG#	117		\$56.78	\$59.20	\$20.10	\$34.84	\$34.84	\$13.35
CPT CODE		Intubation, endotracheal, emergency procedure	\$44.71	\$10.05	\$70.05	N.A.	N.A.	N.A.
CPT CODE		Cardiopulmonary resuscitation (e.g., in cardiac arrest)	344.71	\$10.05	\$70.05	IN.A.	IV.A.	131/31
APG#	131	CHEMOTHERAPY 8Y INFUSION	\$22.99	\$25.33	\$14.42	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy injection, intravenous, single premixed agent,	\$22.99	\$14.49	\$19.80	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy injection, intravenous, complex, using 1 or more	\$30.12	\$19.96	\$22.50	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy inject, iv, complex, using 1 or more agents req.	\$30.12	\$19.90	\$22.50	IV.A.	N.A.	IV.A.
APG#		CHEMOTHERAPY EXCEPT BY INFUSION	\$21.22	\$17,44	\$14.51	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy injection, intravenous, single premixed agent,						N.A.
CPT CODE		Unlisted chemotherapy procedure	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#		TRANSFUSION & PHLEBOTOMY	400.75	404.00	A45.04	40.40	AD 40	N.A.
CPT CODE		Transfusion, blood or blood components	\$29.75	\$24.88	\$15.21	\$9.40	\$9.40	N.A.
CPT CODE		Push transfusion, blood, 2 years or under	\$50.84	\$50.84	\$25.66	N.A.	N.A.	N.A.
APG#		DEEP LYMPH STRUCTURE & THYROID PROCEDURES	100.00	175.04		470.00	475.40	440.50
CPT CODE		Biopsy or excision of lymph node(s); deep cervical node(s)	\$75.76	\$75.94	\$14.08	\$79.36	\$75.43	\$13.53
CPT CODE		Biopsy or excision of lymph node(s); deep axillary node(s)	\$71.45	\$71.32	\$12.47	\$88.62	\$83.68	\$32.45
APG#		ALIMENTARY TESTS AND SIMPLE TUBE PLACEMENT						11.4
CPT CODE		Esophageal motility study	\$7.35	\$2.70	\$9.02	N.A.	N.A.	N.A.
CPT CODE		Esophagus, acid perfusion (Bernstein) test for esophagitis	\$22.60	\$22.60	\$20.33	N.A.	N.A.	N.A.
APG#		ESOPHAGEAL DILATION WITHOUT ENDOSCOPY						
CPT CODE		Dilation of esophagus, by unguided sound or bougie, single o	\$35.72	\$34.92	\$9.58	\$80.79	\$38.20	\$98.16
CPT CODE		Dilation of esophagus, by unguided sound or bougie, single o	\$39.03	\$39.69	\$8.63	\$82.79	\$42.61	\$87.62
APG#		PERCUTANEOUS & OTHER SIMPLE GASTROINTESTINAL 8IOPSY						
CPT CODE		Biopsy of liver, percutaneous needle	\$55.50	\$53.81	\$20.41	\$44.45	\$44.45	\$5.27
CPT CODE		Biopsy, abdominal or retroperitoneal mass, percutaneous needle	\$39.56	\$43.73	\$27.41	\$52.98	\$52.98	\$9.73
CPT CODE		Esophageal intubation and collection of washings for cytology, including preparation of specimens (s	\$31.34	\$31.34	N.A.	N.A.	N.A.	N.A.
APG#	160	ANOSCOPY WITH BIOPSY & DIAGNOSTIC PROCTOSIGMOIDOSCOPY						
CPT CODE	45300	Proctosigmoidoscopy diagnostic (separate procedure)	\$30.98	\$27.67	\$10.90	\$45.64	\$42.91	\$18.40
CPT CODE	45330	Sigmoidoscopy, flexible fiberoptic diagnostic	\$37.11	\$37.05	\$12.91	\$49.88	\$42.39	\$28.16
CPT CODE	46610	Anoscopy for removal of polyp	\$27.64	\$22.64	\$16.57	\$26.60	\$21.41	\$11.39
APG#	161	PROCTOSIGMOIDOSCOPY WITH EXCISION OR BIOPSY		1				
CPT CODE	45331	Sigmoidoscopy, flexible fiberoptic for biopsy and/or collect	\$41.62	\$30.78	\$24.15	\$72.85	\$48.84	\$60.3
CPT CODE	45333	Sigmoidoscopy, flexible fiberoptic for removal of polypoid I	\$43.75	\$31.24	\$26.21	\$71.41	\$46.96	\$52.4
APG#	162	DIAGNOSTIC UPPER GASTROINTESTINAL ENDOSCOPY						
CPT CODE	43235	Upper GI endoscopy including esophagus, stomach and either d	\$76.04	\$76.67	\$19.63	\$70.06	\$61.21	\$20.8
CPT CODE	43239	Upper GI endoscopy incl. esophagus etc. for biopsy and/or collection of specimen by brushing or wa	\$77.34	\$74.51	\$27.77	\$76.36	\$57.58	\$48.0
APG#		THERAPEUTIC UPPER GASTROINTESTINAL ENDOSCOPY						
CPT CODE	43245	Upper GI endoscopy including esophagus etc. for dilation of	\$66.60	\$70.29	\$23.37	\$88.99	\$82.58	\$54.1
CPT CODE		Upper GI endoscopy including esophagus etc. for directed placement of percutaneous gastrostomy t	\$148.24	\$179.72	\$80.78	\$119.85	\$123.25	\$63.8
APG#		DIAGNOSTIC LOWER GASTROINTESTINAL ENDOSCOPY						
CPT CODE		Colonoscopy, fiberoptic, beyond splenic flexure; diagnostic	\$58.05	\$58.29	\$15.06	\$54.51	\$49.70	\$14.4
CPT CODE	45380	Colonoscopy, fiberoptic, beyond splenic flexure; for biopsy	\$68.42	\$64.75	\$12.85	\$76.83	\$69.77	\$28.88
APG#	165	THERAPEUTIC LOWER GASTROINTESTINAL ENDOSCOPY					L.	
CPT CODE	45383	Colonoscopy, fiberoptic, beyond splenic flexure; for ablation of tumor or mucosal lesion	\$63.92	\$66.26	\$22.62	\$103.52	\$72.51	\$86.91
CPT CODE		Colonoscopy, fiberoptic, beyond splenic flexure; for removal of polypoid lesion(s)	\$72.30	\$72.10	\$14.11	\$67.12	\$64.59	\$14.55

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		MEAN, MEDIAN, & STANDARD DEVIATION FOR SUPPLY COSTS - SU	RGICAL I		169			
				Hospitals			A.S.C.s	
SURGICAL					Standard			Standa
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
CPT CODE		Introduction of ureteral catheter or stent into ureter through renal pelvis for drainage and/or injection,		\$144.68	\$58.12	N.A.	N.A.	N.A.
CPT CODE		Ureteral endoscopy through established ureterostomy, with ureteral catheterization, with(out) dilatio	\$118.37	\$82.81	\$66.62	\$127.39	\$127.39	N.A.
APG#	191	CYSTOTOMY						
CPT CODE		Cystotomy or cystostomy; with fulguration and/or insertion o	\$67.08	\$71.34	\$14.76	\$75.65	\$75.65	N.A.
CPT CODE	51040	Cystostomy; cystotomy with drainage	\$68.18	\$68.37	\$8.89	\$111.91	\$111.91	\$54.5
CPT CODE	51045	Cystostomy w/insertion of ureteral catheter or stent (separate procedure)	\$134.91	\$119.49	\$56.37	\$128.19	\$128.19	\$49.8
APG#	192	SIMPLE URETHRAL PROCEDURES				1		
CPT CODE	53200	Biopsy of urethra	\$61.76	\$60.23	\$17.28	\$75.51	\$61.63	\$36.4
CPT CODE	53265	Excision or fulguration; urethral, caruncle	\$63.46	\$61.59	\$13.33	\$79.87	\$66.42	\$36.07
APG#	193	COMPLEX URETHRAL PROCEDURES			Ī			
CPT CODE	53220	Excision or fulguration of carcinoma of urethra	\$72.73	\$75.78	\$18.17	\$73.97	\$73.97	\$10.53
CPT CODE	53235	Excision of urethral diverticulum (separate procedure); male	\$79.56	\$80.66	\$11.58	\$86.99	\$86.99	N.A.
APG#		TESTICULAR EPIDIDYMAL PROCEDURES						
CPT CODE		Orchiectomy, simple, w/ or w/o testicular prosthesis, scrota	\$123.27	\$89.71	\$125.99	\$85.38	\$85.39	\$19.7
CPT CODE		Orchiectomy, simple w/ or w/o testicular prosthesis, scrotal	\$91.87	\$81.00	\$41.15	\$78.61	\$75.27	\$19.10
APG#		INSERTION OF PENILE PROSTHESIS						-
CPT CODE		Insertion of penile prosthesis; non-inflatable	\$192.28	\$217.52	\$77.85	\$562.37	\$90.18	\$825.7
CPT CODE		Insertion of inflatable (multi-component) penile prosthesis, including placement of pump, cylinders, a		\$107.46.	\$67.70	\$560.55	\$85.90	\$827.3
APG#		COMPLEX PENILE PROCEDURES						-
CPT CODE		Removal or replacement of non-inflatable (semi-rigid) or inflatable (self-contained) penile prosthesis	\$142.29	\$132.87	\$60.23	N.A.	N.A.	N.A.
CPT CODE		Removal, repair or replacement of inflatable penile prosthesis, including pump and/or reservoir and/or		\$94,64	\$28.51	\$152.02	\$152.02	\$94.98
APG#		SIMPLE PENILE PROCEDURES			120.0			
CPT CODE		Circumcision, clamp procedure except newborn	\$65.70	\$66.03	\$17.25	\$79.51	\$81.71	\$21.49
CPT CODE		Circumcision, surgical excision other than clamp	\$76.70	\$78.07	\$16.07	\$80.25	\$77.82	\$18.22
APG#		PROSTATE NEEDLE & PUNCH BIOPSY		110.01			111100	7.0
CPT CODE		Biopsy, prostate needle or punch single or multiple, any app	\$57.18	\$57.85	\$16.09	\$68.63	\$67.05	\$30.31
CPT CODE		Biopsy, prostate incisional, any approach	\$72.65	\$71.56	\$16.07	\$72.24	\$75.06	\$14.69
APG#	214	TRANSURETHRAL RESECTION OF PROSTATE & OTHER PROSTATE PROCEDURE	V/2.00	471.00	¥10.07	7/2.27	470.00	¥14.00
CPT CODE		Transurethral resection of bladder neck (separate procedure)	\$85.00	\$84.47	\$11.93	\$91.94	\$85.19	\$31.12
		Transurethral resection or prostate, including control of postoperative bleeding	\$79.03	\$86.35	\$15.42	\$97.34	\$97.34	N.A.
CPT CODE APG#	237	PROCEDURES FOR PREGNANCY & NEONATAL CARE	973.03	900.35	915.42	937.34	937.34	IV.A.
			\$46.94	\$50.60	\$14.69	\$55.87	\$55.65	\$15.99
CPT CODE		Treatment of spontaneous abortion, first trimester, complete	\$44.94	\$41.75	\$14.97	\$59.25	\$65.95	\$18.2
CPT CODE		Treatment of missed abortion, any trimester, completed medic THERAPEUTIC ABORTION	\$44.94	\$41.75	\$14.97	\$59.25	\$65.95	910.2
APG#	238		\$59.65	\$46,95	\$45.04	\$45.16	\$42.08	\$15.3
CPT CODE		Legal (therapeutic ) abortion, by dilation and curettage, an						
CPT CODE .		Legal (therapeutic) abortion, by dilation and evacuation	\$46.56	\$45.81	\$9.56	\$43.66	\$42.32	\$11.6
APG#		FEMALE GENITAL ENDOSCOPY						
CPT CODE		Laparoscopy for visualization of pelvic viscera	\$153.20	\$98.55	\$122.93	\$151.73		\$93.1
CPT CODE		Laparoscopy for visualization of pelvic viscera, with lysis of adhesions	\$155.69	\$132.97	\$115.41	\$188.88	\$136.80	\$133.4
APG#		COLPOSCOPY						
CPT CODE		Colposcopy (vaginoscopy); (separate procedure)	\$42.26	\$45.08	\$10.78	\$49.39	\$45.03	\$25.8
CPT CODE		Colposcopy (vaginoscopy); with biopsies, or biopsy of the cervix	\$60.67	\$50.48	\$35.29	\$56.21	\$45.81	\$32.7
APG#		MISC. FEMALE REPRODUCTIVE PROCEDURES			1			
CPT CODE		Biopsy of vulva (separate procedure)	\$72.35	\$67.90	\$19.37	\$73.36	\$76.03	\$14.8
CPT CODE		Biopsy of cervix, circumferential (cone) with or without dilation	\$77.06	\$73.46	\$40.60	\$81.09	\$79.18	\$21.3
APG#		DILATION & CURETTAGE						
CPT CODE		Dilation and curettage of cervical stump	\$49.50	\$48.80	\$14.34	\$54.62	\$44.38	\$19.69
CPT CODE	58120	Dilation and curettage, diagnostic and/or therapeutic (nonobstetrical)	\$64.02	\$54.99	\$30.75	\$64.15	\$61.89	\$19.68

		MEAN, MEDIAN, & STANDARD DEVIATION FOR SUPPLY COSTS - SU	IIGIOAL I	Hospitals			A.S.C.s	
				Hospitals	Standard			Standard
SURGICAL		·		Median	Deviation	Mean	Median	Deviation
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Ivicali	Median	Deviation
APG#	244	FEMALE GENITAL EXCISION & REPAIR		1110.07	\$33.92	\$91.17	\$102.60	\$22.24
CPT CODE	56620	Vulvectomy; partial, unilateral or bilateral (less than 80%)	\$113.49	\$119.87	\$33.92	\$75.71	\$76.11	\$18.59
CPT CODE		Excision of vaginal cyst or tumor	\$75.22	\$73.98	\$22.15	\$75.71	\$70.11	910.00
APG#	261	ELECTROENCEPHALOGRAM		10.74	40.00	N.A.	N.A.	N.A.
CPT CODE	95819	Electroencephalogram (EEG) including recording awake, drowsy	\$12.29	\$8.71	\$9.93	N.A.	N.A.	N.A.
CPT CODE	95828	Polysomnography (recording, analysis and interpretation of t	\$19.56	\$19.50	\$11.42	N.A.	IV.A.	14.75.
APG#	263	NERVE & MUSCLE TESTS			14.70	N. A.	N.A.	N.A.
CPT CODE	95900	Nerve conduction, velocity and/or latency study; motor, each nerve	\$31.45	\$28.31	\$1.70	N.A.	N.A.	N.A.
CPT CODE	95904	Nerve conduction, velocity and/or latency study; sensory, each nerve	\$24.40	\$18.18	\$5.72	N.A.	N.A.	N.A.
APG#	264	IN JECTION OF SUBSTANCE INTO SPINAL CORD			1	101.00	105.44	\$12.22
CPT CODE	62279	Injection of anesthetic substance (including narcotics), diagnostic or therapeutic epidural, lumbar, ca	\$37.62	\$37.62	\$16.80	\$21.89	\$25.14	\$16.35
CPT CODE	62289	Injection of substance other than anesthetic, contrast, or n	\$166.27	\$166.27	\$25.21	\$25.35	\$20.49	\$10.35
APG#	266	NERVE INJECTION & STIMULATION			-	100.01	400.00	\$8.43
CPT CODE	64510	Injection, anesthetic agent; stellate ganglion (cervical sympathetic)	\$25.03	\$78.56	\$4.56	\$20.81	\$22.08	\$21.19
CPT CODE	64520	Injection, anesthetic agent; lumbar or thoracic (paravertebral, sympathetic)	\$44.48	\$32.61	\$38.66	\$28.78	\$27.68	\$21.19
APG#	267	REVISION & REMOVAL OF NEUROLOGICAL DEVICE				100.00	405.50	N.A.
CPT CODE	63660	Revision or removal of spinal neurostimulator electrodes	\$147.65	\$147.90	\$65.41	\$65.59	\$65.59	N.A.
CPT CODE	63668	Revision or removal of spinal neurostimulator receiver	\$126.13	\$115.01,	\$68.59	\$93.75	\$93.75	IV.A.
APG#	269	CARPAL TUNNEL RELEASE				100.10	100.00	400 10
CPT CODE	64721	Neuroplasty and/or transposition; median nerve at carpal tun	\$98.49	\$93.79	\$16.35	\$95.15	\$96.65	\$26.18
APG#	270	NERVE REPAIR & DESTRUCTION					404.40	\$32,79
CPT CODE	64719	Neuroplasty and/or transposition ulnar nerve at elbow	\$70.22	\$73.30	\$17.26	\$103.26	\$94.49	\$32.79
CPT CODE	64719	Neuroplasty and/or transposition; ulnar nerve at wrist	\$91.91	\$80.33	\$56.53	\$86.51	\$86.88	\$30.91
APG#	271	COMPLEX NERVE REPAIR						107.00
CPT CODE		Suture of digital nerve, hand or foot; one nerve	\$85.71	\$97.49	\$25.40	\$83.09	\$74.35	\$27.68
CPT CODE	64834	Suture of one nerve, hand or foot; common sensory nerve	\$79.22	\$78.56	\$25.76	\$86.90	\$83.14	\$29.43
APG#		SPINAL TAP						
CPT CODE		Spinal puncture, lumbar, diagnostic	\$43.69	\$41.15	\$29.43	N.A.	N.A.	N.A.
CPT CODE	62272	Spinal puncture, therapeutic, for drainage of spinal fluid (	\$60.75	\$58.13	\$16.80	N.A.	N.A.	N.A.
APG#	269	SIMPLE LASER EYE PROCEDURES						47.00
CPT CODE		Trabeculoplasty by laser surgery, one or more sessions	\$37.88	\$93.70	\$18.11	\$9.38	\$10.87	\$7.08
CPT CODE	66821	Discission of secondary membraneous cataract, and/or anterio	\$208.36	\$241.95	\$73.10	\$82.71	\$72.05	\$82.08
APG#	200	COMPLEX LASER FYE PROCEDURES						
CPT CODE	67105	Repair of retinal detachment, one or more sessions, photocoagulation, with(out) drainage of subretin	\$101.10	\$130.29	\$82.44	\$47.92	\$49.84	\$47.27
CPT CODE	67228	Destruction of extensive or progressive retinopathy (e.g., diabetic retinopathy) one or more sessions	\$50.33	\$16.77	\$76.82	\$7.89	\$3.95	\$9.01
APG#		CATARACT PROCEDURES		1				
CPT CODE		Removal of lens material; phacofragmentation technique	\$106.36	\$86.58	\$62.01	\$140.36	\$143.17	\$60.85
CPT CODE	66040	Extraction of lens with or without iridectomy; extracapsular	\$152.66	\$106.93	\$154.40	\$197.79		\$135.90
	66093	Intracapsular cataract extraction with insertion of intraocular lens prosthesis	\$310.00	\$277.65	\$83.60	\$327.43	\$303.11	
CPT CODE	00300	Extracapsular cataract removal with insertion of intraocular	\$344.02	\$295.39	\$151.26	\$308.97	\$286.92	
CPT CODE	0090	Insertion of intraocular lens subsequent to cataract removal	\$297.27	\$285.84	\$54.77	\$302.29	\$283.23	\$120.25
CPT CODE	292							
APG#	6650/	Diridotomy by stab incision (separate procedure); except transfixion	\$83.61	\$86.05	\$41.31	\$80.63	\$81.74	\$19.85
CPT CODE		Cyclocryotherapy initial	\$52.77	\$52.77	\$42.10	\$37.22	\$40.20	\$21.50
CPT CODE	293							
APG#	293	Fistulization of sclera for glaucoma; trephination with iridectomy	\$70.22	\$86.05	\$44.30	\$79.74	\$65.01	\$56.31
CPT CODE	06150	Fistulization of sclera for glaucoma trabeculectomy ab externo	\$71.16	\$65.74	\$31.15	\$124.23	\$125.32	\$29.23
CPT CODE	66170	SIMPLE ANTERIOR SEGMENT EYE PROCEDURES EXCEPT FOR GLAUCOMA						
APG#	294	SINIFE ANTERIOR SCOME TEL TROCES CASE TEST CASE TEST	-					

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		MEAN, MEDIAN, & STANDARD DEVIATION FOR SUPPLY COSTS - SU	NGICAL F		neo		4000	
				Hospitals			A.S.C.s	
SURGICAL					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
CPT CODE	65450	Destruction of lesion of cornea by cryotherapy, photocoagulation or thermocauterization	\$36.71	\$18.66	\$33.57	\$55.81	\$57.51	\$14.26
CPT CODE	66820	Discussion or secondary membraneous cataract and/or anterior	\$198.93	\$137.58	\$175.25	\$108.33	\$105.32	\$51.32
APG#	295	MODERATE ANTERIOR SEGMENT EYE PROCEDURES						
CPT CODE	66625	Iridectomy, w/corneoscleral or corneal section; peripheral of glaucoma (separate procedure)	\$69.15	\$68.66	\$42.81	\$94.52	\$104.65	\$29.35
CPT CODE	66830	Removal of secondary membraneous cataract, with corneoscleral section, with(out) iridectomy	\$179.92	\$122.43	\$165.42	\$119.64	\$119.64	N.A.
APG#	296	COMPLEX ANTERIOR SEGMENT EYE PROCEDURES EXCEPT FOR GLAUCOMA						
CPT CODE	65750	Keratoplasty, penetrating, includes autografts and fresh or preserved grafts	\$30.78	\$30.78	\$20.85	\$294.44	\$213.67	\$242.49
CPT CODE	67010	Removal of vitreous, anterior approach; subtotal removal with mechanical vitrectomy	\$98.66	\$93.11	\$42.43	\$134.33	\$99.25	\$84.64
APG#	297	SIMPLE POSTERIOR SEGMENT EYE PROCEDURES						
CPT CODE	67208	Destruction of localized lesion of retina (e.g., maculopathy, choroidopathy, small tumors), one or mor	\$92.97	\$87.00	\$69.21	N.A.	N.A.	N.A.
CPT CODE	67227	Destruction of extensive or progressive retinopathy (e.g., diabetic retinopathy, one or more sessions;	\$93.36	\$93.36	\$101.28	\$27.79	\$27.79	\$31.03
APG#	298	COMPLEX POSTERIOR SEGMENT EYE PROCEDURES						
CPT CODE	67036	Vitrectomy, mechanical, pars plana approach	\$139.14	\$132.44	\$63.92	\$123.38	\$105.61	\$50.49
CPT CODE	67101	Repair of retinal detachment, one or more sessions, cryotherapy or diathermy, with(out) drainage of	\$146.66	\$144.71	\$17.42	\$253.92	\$87.40	\$355.26
APG#	299	STRABISMUS & MUSCLE EYE PROCEDURES			1			
CPT CODE		Strabismus surgery on patient not previously operated on, an	\$70.86	\$66.63	\$15.07	\$86.91	\$81.24	\$40.42
CPT CODE		Strabismus surgery on patient not previously operated on; an	\$80.78	\$77.60	\$20.80	\$84.62	\$82.24	\$23.69
APG#		SIMPLE REPAIR & PLASTIC PROCEDURES OF EYE						
CPT CODE		Excision of lesion of eye lid without closure or with simple	\$74.90	\$66.62	\$24.86	\$67.45	\$69.06	\$21.05
CPT CODE		Repair of entropion suture	\$65.64	\$60.33	\$17.68	\$83.48	\$79.36	\$36.86
APG#	301	COMPLEX REPAIR & PLASTIC PROCEDURES OF EYE						
CPT CODE	67904	Repair of blepharoptosis (tarso)-levator resection or advancement, external approach	\$66.99	\$60.29	\$19.94	\$73.87	\$77.00	\$30.29
CPT CODE	68720	Dacryocystorhinostomy (fistulization of lacrimal sac to nasal cavity)	\$106.09	\$102.94	\$30.79	\$96.46	\$95.15	\$31.03
APG#	313	OTORHINOLARYNGOLOGIC FUNCTION TESTS			1			
CPT CODE		Oscillating tracking test, with recording	\$15.79	\$15.79	N.A.	N.A.	N.A.	N.A.
CPT CODE		Brainstem evoked response recording (evoked response (EEG) audiometry)	\$4.22	\$4.05	\$2.26	N.A.	N.A.	N.A.
APG#		MAJOR EXTERNAL EAR PROCEDURES						
CPT CODE		Excision exostosis (es), external auditory canal	\$85.19	\$81.57	\$19.17	\$84.50	\$77.97	\$19.36
CPT CODE	69310	Reconstruction of external auditory canal (meatoplasty), separate procedure	\$99.37	\$80.49	\$40.25	\$89.37	\$89.37	\$28.54
APG#	315	TYMPANOSTOMY & OTHER SIMPLE MIDDLE EAR PROCEDURES						
CPT CODE	69420	Myringotomy including aspiration and/or eustachian tube inflation requiring general anesthesia	\$56.33	\$52.70	\$18.62	\$61.72	\$58.70	\$23.59
CPT CODE	69433	Tympanostomy (requiring insertion of ventilating tube), local or topical anesthesia	\$48.37	\$38.77	\$15.98	\$57.36	\$49.49	\$24.87
APG#	316	TYMPANOPLASTY & OTHER COMPLEX MIDDLE EAR PROCEDURES						
CPT CODE	69631	Tympanoplasty w/o mastoidectomy (including canalplasty, atticotomy and/or middle ear surgery), ini	\$88.81	\$87.51	\$22.76	\$76.57	\$75.25	\$24.41
CPT CODE	69660	Stapedectomy with re-establishment of ossicular continuity, with(out) use of foreign material	\$103.53	\$92.88	\$26.01	\$92.54	\$102.26	\$41.87
APG#		SIMPLE AUDIOMETRY						
CPT CODE		Basic comprehensive audiometry	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Tympanometry	\$1.47	\$1.47	\$2.02	N.A.	N.A.	N.A.
APG#		REMOVAL OF IMPACTED CERUMEN						
CPT CODE	69210	Removal impacted cerumen (separate procedure), one or both ears	\$36.03	\$35.56	\$24.17	\$43.00	\$34.88	\$37.91
C CODE	00210							
		AGGREGATE MEAN FOR ALL SURGICAL PROCEDURES	\$83.56	\$76.89	\$38.67	\$91.55	\$81.89	\$42.84

				Hospitals			A.S.C.s	
SURGICAL	-		1		Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	134	BLOOD & BLOOD PRODUCT EXCHANGE						
CPT CODE		Exchange transfusion, blood, other than newborn	\$55.57	\$55.57	N.A.	N.A.	N.A.	N.A.
		Therapeutic apheresis (plasma and/or cell exchange)	\$65.47	\$7.87	\$103.26	N.A.	N.A.	N.A.
CPT CODE		ALLERGY TESTS AND IMMUNOTHERAPY						
APG#	136	Percutaneous tests (scratch, puncture, prick) with allergenic extracts, immediate type reaction, spe	\$0.45	\$0.45	N.A.	N.A.	N.A.	N.A.
CPT CODE			70170					
APG#		PROCEDURES FOR PREGNANCY & NEONATAL CARE	\$9.47	\$9.47	N.A.	N.A.	N.A.	N.A.
CPT CODE	59025	Fetal non-stress test	\$30.58	\$30.58	N.A.	N.A.	N.A.	N.A.
CPT CODE		Initiation and/or supervision of internal fetal monitoring during labor by consultant with report (sepa	730.00	V30.00	14.73.	111731	110.0	
APG#	262	ELECTROCONVULSIVE THERAPY	\$3,35	\$3.35	\$1.46	N.A.	N.A.	N.A.
CPT CODE	90870	Electroconvulsive therapy (includes necessary monitoring); single seizure			N.A.	N.A.	N.A.	N.A.
CPT CODE	90871	Electroconvulsive therapy (includes necessary monitoring); multiple seizures, per day	\$2.32	\$2,32	N.A.	N.A.	IV.A.	IN-M-
APG#	265	SUBDURAL & SUBARACHNOID TAP						N.A.
CPT CODE	62225	Replacement or irrigation, ventricular catheter	\$1.44	\$1.44	N.A.	N.A.	N.A.	
CPT CODE	63744	Replacement, irrigation or revision of lumbosubarachnoid shunt	\$4.56	\$3.34	\$25.98	N.A.	N.A.	N.A.
APG#	268	NEUROSTIMULATOR AND VENTRICULAR SHUNT IMPLANTATION						
CPT CODE		Percutaneous implantation of neurostimulator electrodes; epidural	\$77.15	\$77.15	\$22.05	N.A.	N.A.	N.A.
CPT CODE	64560	Percutaneous implantation of neurostimulator electrodes; autonomic nerve	\$126.12	\$126.12	N.A.	\$63.24	\$63.24	N.A.
APG#	287	MINOR OPTHALMOLOGICAL TESTS & PROCEDURES			1			
CPT CODE	92235	Ophthalmoscopy, with medical diagnostic evaluation; with fluorescein angiography (includes multifr	\$6.12	\$6.12	N.A.	N.A.	N.A.	N.A.
APG#		INNER EAR PROCEDURES						
CPT CODE		Endolymphatic sac operation; with shunt	\$80.31	\$72.55	\$37.13	N.A.	N.A.	N.A.
CPT CODE		Revision fenestration operation	\$116.76	\$116.76	N.A.	\$121.75	\$121.75	N.A.

- 42.

APG#

CPT CODE 25000

			Hospita	ıls			A.S.C.	3	
	SURGICAL			Standard				Standard	
	PROCEDURES	Mean	Median	Deviation	Count	Mean	Median	Deviation	Coun
CPT CODE	45378	\$58.05	\$58.29	\$15.06	27	\$54.51	\$49.70	\$14.47	13
CPT CODE	45380	\$68,42	\$64.75	\$12.85	27	\$76.83	\$69.77	\$28.88	14
APG#	165								-
CPT CODE	45383	\$63.92	\$66.26	\$22,62	12	\$103.52	\$72.51	\$86.91	8
CPT CODE	45385	\$72.30	\$72.10	\$14.11	25	\$67.12	\$64.59	\$14.55	15
APG#	166	112.01							
CPT CODE	43260	\$184.53	\$186.69	\$121.22	12	N.A.	N.A.	N.A.	
CPT CODE	44360	\$55.24	\$57.32	\$26.03	9	\$20.64	\$22.62	\$3.46	3
APG#	167		70112	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1				-
CPT CODE	42821	\$66.61	\$70.14	\$23.76	26	\$91.04	\$79.62	\$34,49	17
CPT CODE	42826	\$73.91	\$68.29	\$17.73	25	\$93.65	\$85.53	\$38.48	15
APG#	168	170101	100.00		1				1
CPT CODE	49505	\$98.70	\$92.01	\$19.41	27	\$110.89	\$114.41	\$40.95	20
CPT CODE	49520	\$131.59	\$134.40	\$40.76	26	\$148.34	\$125.63	\$75.56	16
APG#	169	¥131.00	¥154.40	140.70	20	¥140101	7120100	170100	10
CPT CODE	46230	\$55,39	\$50.94	\$19.29	11	\$77.37	\$79.63	\$26.32	12
OPT CODE	46934	\$53.05	\$54.26	\$15.81	11	\$65.39	\$59.72	\$20.67	10
APG#	170	V00.00	V34.20	¥10.01	+ ''	400.00	400172	420107	10
CPT CODE	45915	\$48,48	\$52.75	\$10,11	5	\$48.55	\$48.55	\$13.26	2
OPT CODE	46200	\$60.69	\$61.73	\$21.08	13	\$69.29	\$66.87	\$21.45	13
APG#	171	960.65	901.73	921.00	13	705.25	700.07	721.40	13
CPT CODE	45170	\$67.18	\$64.67	\$15.56	11	\$57.69	\$64.24	\$18.13	7
CPT CODE	46255	\$84.29	\$61.79	\$81.31	14	\$73.12	\$70.51	\$22.14	15
APG#	172	904.23	901.79	901.31	14	973.12	\$70.51	722.14	10
		\$56.59	\$42.70	\$31.07	12	\$58.34	\$46.81	\$33.30	3
CPT CODE	43760	\$159.11	\$173.65	\$101.72	10	\$39.46	\$39.46	N.A.	1
CPT CODE APG#	173	\$159.11	\$173.00	\$101.72	10	939.40	939.40	IV.A.	+ '
		1405.74	4470.50	\$67.98	9	\$158.46	\$179.80	\$43.67	3
CPT CODE	43750	\$125.74	\$176.56						3
CPT CODE	49421	\$106.53	\$85.40	\$70.62	6	N.A.	N.A.	N.A.	-
APG#	183			110.00	-	155.05	155.05		-
CPT CODE	51720	\$52.21	\$52.27	\$13.88	6	\$55.35	\$55.35	N.A.	1
CPT CODE	51725	\$46.26	\$47.34	\$18.99	7	N.A.	N.A.	N.A.	-
CPT CODE	51736	\$15.26	\$8.61	\$12.91	3	N.A.	N.A.	N.A.	+-
APG#	184				-				-
CPT CODE	50590	\$45.70	\$50.62	\$25.58	5	\$28.65	\$28.65	\$4.17	2
APG#	185								-
CPT CODE	51010	\$74.12	\$72.31	\$27.70	9	\$100.92	\$100.92	N.A.	1
CPT CODE	53660	\$52.69	\$51.30	\$10.04	9	\$79.84	\$73.63	\$33.19	3
CPT CODE	53670	\$35.88	\$25.76	\$33.22	8	\$20.93	\$13.72	\$15.80	3
APG#	186								
CPT CODE	90935	\$26.58	\$23.24	\$17.31	5	N.A.	N.A.	N.A.	-
CPT CODE	90937	\$21.11	\$21.11	N.A.	2	N.A.	N.A.	N.A.	
APG#	187								1
CPT CODE	90945	\$54.61	\$26.91	\$66.79	4	N.A.	N.A.	N.A.	_
CPT CODE	90947	\$71.07	\$71.07	N.A.	1	N.A.	N.A.	N.A.	
APG#	188								
CPT CODE	52000	\$67.35	\$67.48	\$8.12	26	\$80.15	\$76.60	\$20.49	13
CPT CODE	52281	\$64.01	\$66.64	\$8.98	23	\$83.48	\$86.16	\$17.33	8

	MEAN, MEDIAN,		Hospita				A.S.C.		
	SURGICAL		Tiospita	Standard			1	Standard	
	PROCEDURES	Mean	Median	Deviation	Count	Mean	Median	Deviation	Count
CPT CODE	57452	\$42.26	\$45.08	\$10.78	8	\$49.39	\$45.03	\$25.82	9
CPT CODE	57454	\$60.67	\$50.48	\$35.29	11	\$56.21	\$45.81	\$32.78	6
APG#	242	780.07	V30.40	V35.25	+ ''-	400.21	740.01	702170	+-
CPT CODE	56600	\$72.35	\$67.90	\$19.37	15	\$73.36	\$76.03	\$14.89	13
CPT CODE	57520	\$77.06	\$73.46	\$40.60	17	\$81.09	\$79.18	\$21.31	21
APG#	243	¥77.00	¥70.40	7.70.00					_
CPT CODE	57820	\$49.50	\$48.80	\$14.34	24	\$54,62	\$44,38	\$19.69	3
CPT CODE	58120	\$64.02	\$54.99	\$30.75	23	\$64.15	\$61.89	\$19.68	16
APG#	244	V0-1.02	404100	100110			7.5.1.2		1
CPT CODE	56620	\$113.49	\$119.87	\$33.92	9	\$91.17	\$102.60	\$22.24	7
CPT CODE	57135	\$75.22	\$73,98	\$22.15	14	\$75.71	\$76,11	\$18.59	12
APG#	261	470.22	470.00	TEELITO					-
CPT CODE	95819	\$12,29	\$8.71	\$9.93	17	N.A.	N.A.	N.A.	_
CPT CODE	95828	\$19.56	\$19.50	\$11.42	6	N.A.	N.A.	N.A.	1
APG#	262	¥15.00	¥10.00	******	-				+
CPT CODE	90870	\$3,35	\$3.35	\$1.46	2	N.A.	N.A.	N.A.	-
CPT CODE	90871	\$2.32	\$2.32	N.A.	1	N.A.	N.A.	N.A.	_
APG#	263	72.02	10.00		-				
CPT CODE	95900	\$1,44	\$1.44	\$1.70	5	N.A.	N.A.	N.A.	_
CPT CODE	95904	\$4.56	\$3.34	\$5.72	8	N.A.	N.A.	N.A.	
APG#	264	77.00	10101					1	
CPT CODE	62278	\$31.45	\$28.31	\$16.80	7	\$21.89	\$25,14	\$12.22	7
CPT CODE	62289	\$24.40	\$18.18	\$25.21	3	\$25,35	\$20.49	\$16.35	6
APG#	265	V2-1-10	710110	720121	-				
CPT CODE	62225	\$37.62	\$37.62	N.A.	1	N.A.	N.A.	N.A.	
CPT CODE	63744	\$166.27	\$166.27	\$25.98	2	N.A.	N.A.	N.A.	_
APG#	266	¥100.27	+1001E7	720100	-				+
CPT CODE	64510	\$25.03	\$25.56	\$4.56	4	\$20.81	\$22.08	\$8.43	9
CPT CODE	64520	\$44.48	\$32.61	\$38.66	7	\$28.78	\$27.68	\$21,19	5
APG#	267	4.441.10	102.01	100.00	1				
CPT CODE	63660	\$147.65	\$147.90	\$65.41	3	\$65.59	\$65.59	N.A.	1
CPT CODE	63688	\$126.13	\$115.01	\$68.59	4	\$93.75	\$93.75	N.A.	1
APG#	268			100,00				-	1
CPT CODE	63650	\$77.15	\$77.15	\$22.05	2	N.A.	N.A.	N.A.	-
CPT CODE	64560	\$126.12	\$126.12	N.A.	1	\$63.24	\$63.24	N.A.	1
APG#	269	V120.12	4120.12	11010			100.0		_
CPT CODE	64721	\$98.49	\$93.79	\$19.35	24	\$95,15	\$96.65	\$26.18	20
APG#	270	+50.45	100170	110100					+
CPT CODE	64718	\$76.72	\$73.30	\$17.26	13	\$103.26	\$94.49	\$32.79	11
CPT CODE	64719	\$91,91	\$80.33	\$56.53	13	\$86.51	\$86.88	\$30.91	10
APG#	271	931.31	780.33	\$30.55	13	¥00.01	400.00	+00.01	+
CPT CODE	64831	\$85.71	\$97,49	\$25.40	11	\$83.09	\$74,35	\$27.68	6
CPT CODE	64834	\$79.22	\$78.56	\$25.76	9	\$86.90	\$83.14	\$29.43	6
APG#	272	V/3.22	7,3.50	V20,70	-	+00.00	755114	120.40	+
CPT CODE	62270	\$43,69	\$41.15	\$19.43	9	N.A.	N.A.	N.A.	+
	62272	\$43.69	\$58.13	\$18.88	3	N.A.	N.A.	N.A.	+
APG#	287	900.75	400.13	410.00	-	IN.A.	11.0	11.0.	+
CPT CODE	92235	\$6.12	\$6.12	N.A.	1	N.A.	N.A.	N.A.	+

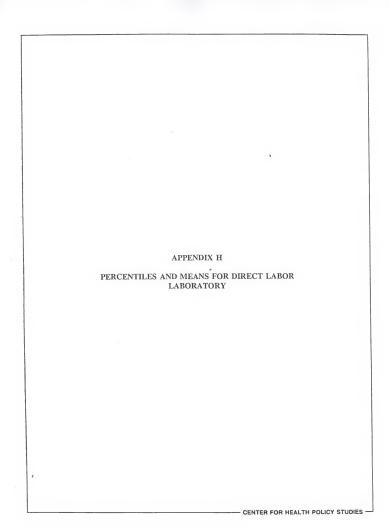
	MEAN, MEDIAN,		Hospita				A.S.C.		
	SURGICAL		Trospita	Standard	1		1	Standard	
	PROCEDURES	Mean	Median	Deviation	Count	Mean	Median	Deviation	Coun
	289	ividali	IVICUIAII	Deviation		1110011			1
APG#	65855	\$37.88	\$33,70	\$18.11	10	\$9,38	\$10.87	\$7.08	3
CPT CODE		\$208.36	\$241.95	\$73.10	12	\$82.71	\$72.05	\$82.08	12
CPT CODE	66821	\$208.36	\$241.95	9/3.10	12	402.71	V/2.03	V02.00	- 12
APG#	290	A101.10	\$130.29	\$82.44	3	\$47.92	\$49.84	\$47.27	4
CPT CODE	67105	\$101.10	\$130.29	\$76.82	4	\$7.89	\$3.95	\$9.01	3
CPT CODE	67228	\$50.33	\$16.77	\$76.82	4	\$7.09	93.95	\$9.01	+ -
APG#	291		400.50	400.04	10	6140.20	\$143,17	\$60.85	9
CPT CODE	66850	\$106.36	\$86.58	\$62.01	19	\$140.36	\$143.17	\$135.90	10
CPT CODE	66940	\$152.66	\$106.93	\$154.40	1.6				10
CPT CODE	66983	\$310.00	\$277.65	\$83.60	18	\$327.43	\$303.11	\$110.93	23
CPT CODE	66984	\$344.02	\$295.39	\$151.26	22	\$308.97	\$286.92	\$111.66	
CPT CODE	66985	\$297.27	\$285.84	\$54.77	20	\$302.29	\$283.23	\$120.25	18
APG#	292								-
CPT CODE	66500	\$83.61	\$86.05	\$41.31	5	\$80.63	\$81.74	\$19.85	4
CPT CODE	66720	\$52.77	\$52.77	\$42.10	2	\$37.22	\$40.20	\$21.50	5
APG#	293								<u> </u>
CPT CODE	66150	\$70.22	\$86.05	\$44.30	3	\$79.74	\$65.01	\$56.31	3
CPT CODE	66170	\$71.16	\$65.74	\$31.15	7	\$124.23	\$125.32	\$29.23	10
APG#	294								
CPT CODE	65450	\$36.71	\$18.66	\$33.57	3	\$55.81	\$57.51	\$14.26	4
CPT CODE	66820	\$198.93	\$137.58	\$175.25	5	\$108.33	\$105.32	\$51.32	4
APG#	295								
CPT CODE	66625	\$69.15	\$68.66	\$42.81	4	\$94.52	\$104.65	\$29.35	9
CPT CODE	66830	\$179.92	\$122.43	\$165.42	8	\$119.64	\$119.64	N.A.	1
APG#	296								
CPT CODE	65750	\$30.78	\$30.78	\$20.85	2	\$294,44	\$213.67	\$242.49	12
CPT CODE	67010	\$98.66	\$93,11	\$42.43	10	\$134.33	\$99.25	\$84.64	8
APG#	297	100,00							1
CPT CODE	67208	\$92.97	\$87.00	\$69.21	3	N.A.	N.A.	N.A.	
CPT CODE	67227	\$93.36	\$93.36	\$101.28	2	\$27.79	\$27.79	\$31.03	2
APG#	298	V33.30	¥30.00	+1011E0	-				-
CPT CODE	67036	\$139.14	\$132.44	\$63.92	6	\$123.38	\$105.61	\$50,49	8
	67101	\$146.66	\$144.71	\$17.42	3	\$253.92	\$87.40	\$355.26	3
CPT CODE		\$140.00	9144.71	\$17.42	3	V230.32	407.40	+500.20	+-
APG#	299	\$70.86	\$66.63	\$15.07	9	\$86.91	\$81.24	\$40.42	15
CPT CODE	67311		\$77.60	\$20.80	9	\$84.62	\$82.24	\$23.69	20
CPT CODE	67312	\$80.78	\$77.60	\$20.80	9	904.02	902.24	723.03	- 20
APG#	300		100.00	101.00	8	\$67.45	\$69.06	\$21.05	11
CPT CODE	67840	\$74.90	\$66.62	\$24.86			\$79.36	\$36.86	14
CPT CODE	67921	\$65.64	\$60.33	\$17.68	10	\$83.48	\$79.36	\$35.85	14
APG#	301							100.00	15
CPT CODE	67904	\$66.99	\$60.29	\$19.94	9	\$73.87	\$77.00	\$30.29	15
CPT CODE	68720	\$106.09	\$102.94	\$30.79	9	\$96.46	\$95.15	\$31.03	11
APG#	313								-
CPT CODE	92545	\$15.79	\$15.79	N.A.	1	N.A.	N.A.	N.A.	
CPT CODE	92585	\$4.22	\$4.05	\$2.26	7	N.A.	N.A.	N.A.	
APG#	314								
CPT CODE	69140	\$85.19	\$81.57	\$19.17	6	\$84.50	\$77.97	\$19.36	3
CPT CODE	69310	\$99.37	\$80.49	\$40.25	7	\$89.37	\$89.37	\$28.54	2

			Hospita	ils			A.S.C.	5	
	SURGICAL			Standard				Standard	
	PROCEDURES	Mean	Median	Deviation	Count	Mean	Median	Deviation	Count
APG#	315								
CPT CODE	69420	\$56.33	\$52.70	\$18.62	13	\$61.72	\$58.70	\$23.59	11
CPT CODE	69433	\$48.37	\$38.77	\$15.98	9	\$57.36	\$49.49	\$24.87	11
APG#	316								
CPT CODE	69631	\$88.81	\$87.51	\$22.76	11	\$76.57	\$75.25	\$24.41	8
CPT CODE	69660	\$103.53	\$92.88	\$26.01	8	\$92.54	\$102.26	\$41.87	4
APG#	317								
CPT CODE	69806	\$80.31	\$72.55	\$37.13	3	N.A.	N.A.	N.A.	
CPT CODE	69840	\$116.76	\$116.76	N.A.	1	\$121.75	\$121.75	N.A.	1
APG#	318				T . I			1	T
CPT CODE	92557	N.A.	N.A.	N.A.	5	N.A.	N.A.	N.A.	
CPT CODE	92567	\$1.47	\$1.47	\$2.02	5	N.A.	N.A.	N.A.	
APG#	319								
CPT CODE	69210	\$36.03	\$35.56	\$24.17	6	\$43.00	\$34.88	\$37.91	5



		MEAN, MEDIAN, & STANDARD DEVIATION FOR DIRECT LABOR COSTS - RA	510200			Dis	/sicians' (	Office
				Hospitals	Standard	Phy	/SIGIDINS C	Standard
RADIOLOGY						Mean	Median	Deviation
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	341	SIMPLE DIAGNOSTIC NUCLEAR MEDICINE				110 17	110.00	\$13.27
CPT		Bone imaging; whole body	\$41.58	\$38.62	\$12.60	\$40.17	\$43.98	\$13.27
APG#	342	COMPLEX DIAGNOSTIC NUCLEAR MEDICINE						100.10
CPT	78461	Myocardial perfusion imaging; exercise and redistribution, qualitative or quantitative	\$82.40	\$73.01	\$52.36	\$42.11	\$38.14	\$20.18
APG#		THERAPEUTIC NUCLEAR MEDICINE BY INJECTION						
CPT	79100	Radionuclide therapy, polycythemia vera, chronic leukemia, each treatment	\$30.51	\$25.84	\$19.21	\$8.07	\$8.07	N.A.
APG#	345	OBSTETRICAL ULTRASOUND						
CPT	76805	Echography, pregnant uterus, B-scan and/or real time with image documentation; complete (complet	\$25.36	\$26.42	\$11.30	\$21.33	\$24.86	\$13.32
APG#	346	DIAGNOSTIC ULTRASOUND EXCEPT OBSTETRICAL						
CPT	76519	Ophthalmic biometry by ultrasound echography, A-mode; with intraocular lens power calculation	\$19.23	\$19.23	N.A.	\$16.86	\$16.86	\$13.00
CPT	76700	Echography, abdominal, B-scan and/or real time with image documentation; complete	\$24.96	\$25.42	\$10.21	\$21.38	\$23.34	\$5.94
APG#	348	MAGNETIC RESONANCE IMAGING				1		
CPT	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	\$38.48	\$32.51	\$16.12	\$22.26	\$22.26	\$12.05
APG#		COMPUTERIZED AXIAL TOMOGRAPHY						
CPT		Computerized axial tomography; head or brain without contrast material	\$14.26	\$12.64	\$6.90		\$11.00	\$4.26
CPT	70470	Computerized axial tomography; head or brain without contrast material, followed by contrast materi	\$22.74	\$19.28	\$12.05	\$18.01		\$4.74
CPT	74160	Computerized axial tomography; abdomen with contrast material(s)	\$31.24	\$27.80	\$20.07	\$24.33	\$21.99	\$6.87
APG#	350	MAMMOGRAPHY			1			
CPT CPT		Mammography; bilateral	\$12.25	\$12.14	\$4.71	\$11.97	\$11.58	\$2.15
APG#	351	PLAIN FILM						
CPT		Radiologic examination, chest; single view, frontal	\$4,44	\$3.47	\$2.69	\$3.68	\$2.33	\$2.95
CPT		Radiologic examination, chest; two views, frontal and lateral	\$5.15	\$3.90	\$2.85	\$4.24	\$2.91	\$3.09
		Radiologic examination, criest, two views, northal and factor	\$7.85	\$6.20	\$3.88	\$7.83	\$6.78	\$4.07
CPT	73510	Radiologic examination, hip, complete, minimum of the views complete, minimum of three views	\$6.68	\$5.97	\$2.12	\$6.14	\$6.05	\$1.91
CPT			70.00	10.00				
APG#		FLUOROSCOPY	\$11.61	\$8.91	\$5,89	\$19.65	\$10.93	\$20.07
CPT		Radiologic examination, chest, two views, frontal and lateral with fluoroscopy	*11101	10.0		1	1	
APG#	353	CEREBRAL, PULMONARY, CERVICAL & SPINAL ANGIOGRAPHY	\$112.24	\$87.40	\$64.69	N.A.	N.A.	N.A.
CPT		Angiography, carotid, cerebral, bilateral; catheter, complete	9112.24	707.40	V04.05	14.74	141741	1100
APG#	354	VENOGRAPHY OF EXTREMITY	\$25.05	\$24.50	\$3,48	\$23.77	\$23.77	\$3.48
CPT	75821	Venography, extremity, unilateral, complete procedure	\$25.05	724.50	75.40	V23.77	420.77	40.40
APG#	355	NON-CARDIAC, NON-CEREBRAL VASCULAR RADIOLOGY	\$97.10	\$94.76	\$35.32	N.A.	N.A.	N.A.
CPT		Aortography, abdominal plus bilateral iliofemoral lower extremity, catheter	\$97.10	\$94.70	933.32	14.0.	14.70.	14.70.
APG#	356	DIGESTIVE RADIOLOGY			10.10	101.50	\$28.55	\$11.57
CPT		Radiologic examination, gastrointestinal tract, upper; with or without delayed films, without KU8	\$15.13	\$13.53	\$7.40			\$2.59
CPT	74270	Radiologic examination, colon; barium enema	\$21.81	\$21.32	\$3.47		\$23.28	
CPT	74280	Radiologic examination, colon; air contrast with specific high density barium with or without glucago	\$25.20	\$24.69	\$3.47	\$25.42	\$25.23	\$3.97
APG#	357	UROGRAPHY & GENITAL RADIOLOGY						
CPT	74400	Urography (pyelography), intravenous, with or without KU8, with or without tomography	\$25.40	\$24.85	\$5.17	\$21.78	\$22.43	\$1.97
CPT	74415	Urography, infusion, drip technique and/or bolus technique with nephrotomography	\$25.50	\$23.30	\$6.11	\$22.73	\$22.88	\$0.68
APG#		ARTHROGRAPHY						
CPT	73041	Radiologic examination, shoulder, arthrography; complete procedure	\$25.07	\$22.80	\$12.13	\$18.24	\$16.46	\$9.16
APG#	359	MYELOGRAPHY						
CPT		Myelography, lumbosacral; complete procedure	\$27.37	\$25.61	\$11.19	\$18.94	\$18.94	N.A.
APG#	360	MISCELLANEOUS RADIOLOGY						
CPT		Mammary ductogram or galactogram, multiple ducts; complete procedure	\$35.24	\$28.59	\$15.73	N.A.	N.A.	. N.A.
								1
		AGGREGATE MEAN FOR ALL RADIOLOGY PROCEDURES	\$30.14	\$27.14	\$13.50	\$19.01	\$18.71	\$7.33

	111274117	MEDIAN, & STANDARD DEVIATION FOR DIRECT LABO		Hospital	s	PI	nysicians'	Office
RADIOLOGY				1	Standard			Standard
		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
PROCEDURES		APG & CFT DESCRIPTION	- Incom					
APG#	344	RADIATION THERAPY						
CPT	77/130	Weekly megavoltage treatment management; complex	\$91.34	\$91.34	\$108.46	N.A.	N.A.	N.A.



		MEAN, MEDIAN, & STANDARD DEVIATION FOR DIRECT LABOR COSTS - LABOR		11		Dhy	sicians' C	Office
				Hospital		Phy	/sicians C	Standard
ABORATORY	1			Mar Para	Standard	Mean	Median	Deviation
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	417	TISSUE TYPING				N.A.	N.A.	N.A.
CPT	86074	Blood crossmatch antiglobulin technique	\$12.43	\$13.41	\$9.01	N.A.	N.A.	IV.A.
APG#	419	SIMPLE IMMUNOLOGY TESTS				N.A.	N.A.	N.A.
CPT	86422	Radioallergosorbent test, in vitro testing for allergen-specific IgE; 6 or more tests	\$4.18	\$4.18	\$1.68		\$6.74	\$0.66
CPT	86430	Rheumatoid factor; qualitative	\$5.58	\$4.55	\$3.75	\$6.83	\$6.74	\$0.00
APG#	421	SIMPLE MICROSIOLOGY TESTS				101.00	404.00	\$1.58
CPT	87070	Culture, bacterial, definitive; any other source	\$17.10	\$16.98	\$11.14	\$21.60	\$21,60	
CPT	87086	Culture, bacterial, urine; quantitative, colony count	\$7.34	\$7.42	\$3.29	\$8.31	\$7.92	\$1.11
CPT	87088	Culture, bacterial, urine identification, in addition to quantitative or commercial kit	\$18.75	\$18.59	\$6.79	\$29.95	\$29.95	\$3.13
CPT	97101	Culture, fungi, isolation (with or without presumptive identification); skin	\$37.86	\$39.56	\$8.69	\$47.22	\$47.22	\$6.67
CPT	97194	Sensitivity studies, antibiotic; disk method, per plate (12 or less disks)	\$3.97	\$3.61	\$2.38	\$7.93	\$6.85	\$2.43
CPT	97205	Smear primary source, with interpretation; routine stain for bacteria, fungi, or cell types	\$6.03	\$5.41	\$1.54	\$5.24	\$4.95	\$0.80
	07210	Smear, primary source w/interpretation; wet mount w/simple stain, for bacteria, fungi, ova, and/or paras	\$5.63	\$5.34	\$1.92	\$11.91	\$8.22	\$7.05
CPT	422	COMPLEX MICROSIOLOGY TESTS			1			
APG#	97040	Culture, bacterial, definitive; blood (includes anaerobic screen)	\$12.38	\$5.57	\$10.53	\$16.63		\$12.24
CPT		Culture, bacterial, definitive; stool	\$16.88	\$16.93	\$8.05	\$25.16	\$26.35	\$5.01
CPT	87045	Ova and parasites, direct smears, concentration and identification	\$12.35	\$9.16	\$8.55	\$34.87	\$34.87	\$10.55
CPT	423	SIMPLE ENDOCRINOLOGY TESTS		- 7				
APG#			\$5.11	\$5.60	\$3.03	\$2.76	\$2.76	N.A.
CPT	84435	Thyroxine, binding globulin (T8G)	\$3.64	\$3.64	\$0.92	N.A.	N.A.	N.A.
CPT		Thyroxine, (t-4), cpb or resin uptake						
APG#	425	BASIC CHEMISTRY TESTS	\$4.55	\$3,46	\$3.96	\$2,80	\$2.76	\$0.33
CPT		Glucose except urine (eg, blood, spinal fluid, joint fluid)	\$3.09	\$3.63	\$2.01	\$2.62	\$2.62	\$0.19
CPT		Potassium; blood	\$4.21	\$3.87	\$2,58	\$2.80	\$2.76	\$0.33
CPT	84478	Triglycerides, blood	7-712-1	10101	12.00			
APG#		SIMPLE CHEMISTRY TESTS	\$3.65	\$2.70	\$2.58	\$1,91	\$1.87	\$0.14
CPT		Blood occult; feces screening	\$3.65	\$3.22	\$2.21	\$2.76	\$2.76	N.A.
CPT	84479	Tridothyronine (T-3); resin uptake	\$13.12	\$10.96	\$7,54	\$5.97	\$5.97	\$1.14
CPT		Analysis of arterial blood gas (oxygen saturation, po2, pco2)	V13.12	V10.00	47104	10101	10.0.	-
APG#		COMPLEX CHEMISTRY TESTS	\$5.96	\$6,49	\$2.58	N.A.	N.A.	N.A.
CPT	83036	Hemoglobin; glycated	\$5.57	\$3.74	\$5.03	\$4.58	\$4.81	\$0.52
CPT	83718	Lipoprotein, direct measurement; high density cholesterol (HDL cholesterol)		\$6.83	\$3.91	\$1.24	\$1.24	N.A.
CPT	83720	Lipoprotein, direct measurement; high density cholesterol (IDL cholesterol)	\$7.66	\$0.83	\$3.91	91.24	91.24	14.0.
APG#	428	MULTICHANNEL CHEMISTRY TESTS		\$6.99	\$3.23	\$7.48	\$7.48	\$1.05
CPT	80016	Automated multichannel test; 13-16 clinical chemistry tests	\$7.17		\$2.88	\$6.74	\$6.74	N.A.
CPT	80019	Automated multichannel test, 19 or more clinical chemistry tests	\$6.47	\$5.97	\$2.00	90.74	90.74	14.74.
APG#	429	SIMPLE TOXICOLOGY TESTS		1	10.00		41.4	N.A.
CPT		Immunoassay technique for drugs	\$5.62	\$5.46	\$3.78	N.A.	N.A.	N.A.
APG#	431	LIBINALYSIS				11.15	1 4 4 00	44.45
CPT	81000	Urinalysis routine (pH, specific gravity, protein, uroglobin, any number of these constituents; with micros	\$8.93	\$5.98	\$8.02	\$4.45	\$4.00	\$1.15
CPT	81002	Urinalysis routine, without microscopy, non-automated	\$4.58	\$3.19	\$4.73	\$3.09	\$2.22	\$1.94
APG#		THERAPEUTIC DRUG MONITORING						
CPT		Phenytoin	\$5.01	\$4.90	\$3.09	\$4.45	\$4.45	\$4.36
CPT		Theophylline, blood or saliva	\$4.62	\$3.62	\$2.88	\$2.62	\$2.62	\$0.19
APG#		RADIOIMMUNOASSAY TESTS		1				
CPT CPT		Digoxin	\$7.51	\$6.36	\$4.21	\$2.75	\$2.75	N.A.
		Thyroxine; total	\$5.08	\$3.75	\$3.23	\$67.61	\$67.61	N.A.
CPT	04430	Thyroid stimulating hormone (TSH), RIA or EIA	\$4.17	\$3.79	\$2.11	\$8.58	\$3.44	\$9.16
CPT	04443	Carcinoembryonic antigen (CEA), RIA or EIA	\$5.50	\$4.62	\$4.03	\$35.03	\$35.03	N.A.

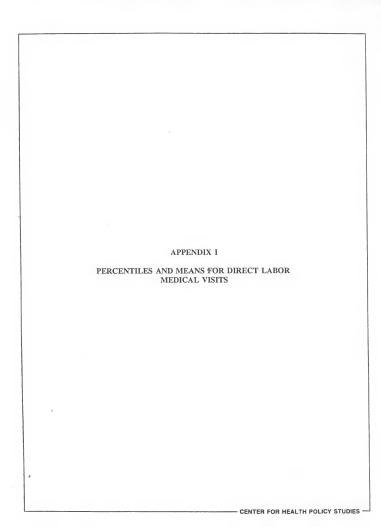
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## APPENDIX H

		MEAN, MEDIAN, & STANDARD DEVIATION FOR DIRECT LABOR COSTS - LA		Hospital	3	Ph	sicians' C	Office
					Standard			Standard
LABORATORY		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
PROCEDURES				1				
APG#		SIMPLE CLOTTING TESTS	\$7.05	\$4.77	\$6.58	\$6,42	\$6.74	\$1.31
CPT		Prothrombin time						\$3.87
CPT	85730	Thromboplastin time, partial (PTT); plasma or whole blood	\$9.70	\$4.18	\$11.17	\$10.96	\$10.96	\$3.87
APG#	436	SIMPLE HEMATOLOGY TESTS						
CPT	85022	Blood count; hemogram, automated, and manual differential WBC count (C8C)	\$10.66	\$9.00	\$7.91	\$7.72	\$7.72	\$0.71
CPT	85031	Blood count; hemogram, manual, complete CBC (RBC, WBC, Hgb, Hct, differential and indices)	\$22.05	\$8.99	\$23.38	\$6.81	\$6.81	\$0.45
APG#		LITHIUM LEVEL MONITORING						
CPT		Lithium, blood, quantitative	\$4.63	\$4.03	\$2.94	N.A.	N.A.	N.A.
APG#		BLOOD AND URINE DIPSTICK TESTS						
CPT		Glucose; blood, reagent strip	\$5.42	\$5.60	\$2.25	\$2.25	\$2.25	\$0.05
		AGGREGATE MEAN FOR ALL LABORATORY PROCEDURES	\$8,43	\$7.24	\$5.13	\$12.00	\$11.70	\$2,79

			Hospitals			Ph	Office	
LABORATORY	+				Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	420	COMPLEX IMMUNOLOGY TESTS						
CPT	86999	Unlisted transfusion medicine procedure	\$6.08	\$6.08	\$6.04	N.A.	N.A.	N.A.
APG#	424	COMPLEX ENDOCRINOLOGY TESTS						
CPT	83500	Hydroxyproline; free	\$3.83	\$3.83	N.A.	N.A.	N.A.	N.A.
APG#	430	COMPLEX TOXICOLOGY TESTS						
CPT	83015	Heavy metal (arsenic, barium, beryllium, bismuth, antimony, mercury); screen	\$2.61	\$1.70	\$2.02	N.A.	N.A.	N.A.
APG#	435	COMPLEX CLOTTING TESTS						
CPT	85210	Clotting; factor II, prothrombin, specific	\$1.49	\$1.49	N.A.	N.A.	N.A.	N.A.
APG#	437	COMPLEX HEMATOLOGY TESTS			L			
CPT	85999	Unlisted hematology and coagulation procedure	\$15.47	\$15.47	\$19.76	N.A.	N.A.	N.A.

MEAN	, MEDIAN, STA	ANDARD DE			RECT LABO	N CO313 - LA		ns' Office	
			Hos	pitals			FIIYSICIA		
LA80RATORY				Standard				Standard	
PROCEDURES		Mean	Median	Deviation	Count	Mean	Median	Deviation	Count
CPT	84420	\$4.62	\$3.62	\$2.64	21	\$2.62	\$2.62	\$0.19	4
APG#	433								
CPT	82643	\$7.51	\$6.36	\$4.21	10	\$2.75	\$2.75	N.A.	2
CPT	84436	\$5.08	\$3.75	\$3.29	8	\$67.61	\$67.61	N.A.	2
CPT	84443	\$4.17	\$3.79	\$2.11	20	\$8.58	\$3.44	\$9.16	6
CPT	86151	\$5.50	\$4.62	\$4.03	16	\$35.03	\$35.03	N.A.	2
APG#	434							1	
CPT	85610	\$7.05	\$4.77	\$6.58	23	\$6.42	\$6.74	\$1.31	5
CPT	85730	\$9.70	\$4.18	\$11.17	23	\$10.96	\$10.96	\$3.87	4
APG#	435					1			
CPT	85210	\$1.49	\$1.49	N.A.	4	N.A.	N.A.	N.A.	
APG#	436								
CPT	85022	\$10.66	\$9.00	\$7.91	20	\$7.72	\$7.72	\$0.71	6
CPT	85031	\$22.05	\$8.99	\$23.38	10	\$6.81	\$6.81	\$0.45	2
APG#	437								
CPT	85999	\$15.47	\$15.47	\$19.76	3	N.A.	N.A.	N.A.	11
APG#	439								
CPT	83725	\$4.63	\$4.03	\$2.94	16	N.A.	N.A.	N.A.	1
APG#	440							<u>'</u>	
CPT	82948	\$5.42	\$5.60	\$2.25	8	\$2.25	\$2.25	\$0.05	2



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		MEAN, MEDIAN, & STANDARD DEVIATION FOR DIRECT LABOR COSTS - M		Hos	oitals		Physicia	an' Office
				1103	Standard		11170101	Standar
MEDICAL			Mean	Median	Deviation	Mean	Median	Deviatio
PROCEDURES		APG & ICD-9 DESCRIPTION	\$10.95	\$11.03	\$7.06	\$5.55	\$4.54	\$4.56
CD9 CODE		Inflammation of eyelids - blepharitis	¥10.33	V11.03	47.00	70100		
APG#	754	EYE DISEASE EXCEPT CATARACT, REFRACTION DISORDER & CONJUNCTIVITIS	\$15.45	\$14.64	\$3.56	\$14.38	\$4.88	\$16.72
CD9 CODE		Glaucoma - primary open angle glaucoma	\$17.93	\$17.93	\$9.83	\$7.48	\$5.63	\$5,47
CD9 CODE	365.9	Glaucoma - unspecified	\$11.01	\$17.53	\$3.96	\$6.59	\$6.82	\$1.09
CD9 CODE	375.15	Disorders of lacrimal system - other disorders - tear film insufficiency, unspecified	\$11.01	\$10.52	93.90	\$0.09	\$0.02	71.03
APG#	766	DENTAL DISEASE		10.07	\$14.85	\$6.31	\$6.38	\$4.32
ICD9 CODE	V58.4	Other after following surgery	\$14.15	\$6.07	\$14.85	\$6.31	90.30	94.32
APG#	769	ACUTE NONINFECTIOUS EAR, NOSE, & THROAT DISEASE			110.10	\$7.55	\$6.50	\$5.99
ICD9 CODE	784.7	Symptoms involving head and neck - epistaxis	\$21.01	\$24.31	\$12.43	\$7.55	\$6.50	\$0.99
APG#	771	HEARING LOSS				10.01	\$1.92	\$2.59
ICD9 CODE	389.9	Hearing loss - unspecified	\$6.91	\$5.53	\$4,87	\$2.84	\$1.92	\$2.59
APG#	772	OTHER EAR, NOSE, THROAT, & MOUTH DISEASES					110.10	\$5.14
ICD9 CODE	380.4	Disorders of external ear - impacted cerumen	\$16.84	\$14.09	\$10.28	\$9.16	\$10.12	
ICD9 CODE	744.00	Anomalies of ear causing impairment of hearing - unspecified anomaly of ear with impairment of hear	\$18.44	\$13.03	\$15.89	\$6.67	\$6.59	\$1.29
APG#	773							
ICD9 CODE	380.10	Disorders of external ear - ineffective otitis externa, unspecified	\$11.76	\$11.00	\$8.21	\$3.54	\$1.63	\$4.19
ICD9 CODE	381.01	Nonsuppurative otitis media and Eustachian tube disorder - acute serous otitis media	\$10.36	\$9.66	\$5.23	\$5.72	\$4.19	\$4.93
ICD9 CODE	382.9	Suppurative and unspecified otitis media - unspecified otitis media	\$7.88	\$7.80 /	\$4.51	\$4.66	\$2.44	\$3.72
ICD9 CODE	465.9	Acute upper respiratory infections of multiple or unspecified sites - unspecified	\$10.95	\$9.11	\$5.24	\$6.14	\$6.48	\$3.84
APG#	783	PNEUMONIA						
ICD9 CODE	486	Pneumonia, organism unspecified	\$16.02	\$11.86	\$9.59	\$3.94	\$2.78	\$2.60
APG#	784	RESPIRATORY DISEASE EXCEPT EMPHYSEMA, CHRONIC BRONCHITIS & ASTHMA						
ICD9 CODE		Symptoms involving respiratory system and other chest symptoms - other	\$15.98	\$11.46	\$9.91	\$4.36	\$3.88	\$2.85
APG#	785	Symptoms involving very series						
ICD9 CODE		Asthma - unspecified	\$27.74	\$27.93	\$14.19	\$17.26	\$16.97	\$7.63
ICD9 CODE	496	Chronic airway obstruction, not elsewhere classified	\$9.30	\$3.14	\$11.32	\$3.19	\$2.44	\$2.07
APG#	796	CONGESTIVE HEART FAILURE & ISCHEMIC HEART DISEASE & HYPERTENSION						
ICD9 CODE		Angina pectoris - other and unspecified	\$14.23	\$10.05	\$11.93	\$8.01	\$6.62	\$5.62
ICD9 CODE		Other forms of chronic ischemic heart disease - unspecified	\$14.87	\$14.64	\$9.38	\$8.46	\$6.62	\$4.97
ICD9 CODE	414.9	Heart failure	\$25.36	\$30.93	\$15.38	\$8.02	\$5.95	\$6.01
	797	HYPERTENSION						
APG#		Essential hypertension - unspecified	\$19.81	\$16.37	\$13.18	\$8.26	\$7.09	\$4.64
ICD9 CODE		CARDIOVASCULAR DISEASE EXCEPT CHF, ISCHEMIC HEART DISEASE & HYPERTENSION						
APG#	800	Other forms of chronic ischemic heart disease - coronary atherosclerosis	\$15.30	\$14.64	\$8.96	\$8.73	\$6.62	\$5.05
ICD9 CODE		NONINFECTIOUS GASTROENTERITIS		111111				
APG#	811		\$22.00	\$20.24	\$19.17	\$17.67	\$11.69	\$16.1
ICD9 CODE		Other noninfectious gastroenteritis and colitis - other and unspecified	TELIOO	12012	7.121.11	1		
APG#	812	ULCERS, GASTRITIS & ESOPHAGITIS	\$14.97	\$9.94	\$12.35	\$12.39	\$9.53	\$10.7
ICD9 CODE		Acute gastritis - unspecified gastritis and gastroduodentitis	V14.57	40.04	112100	118100		
APG#	813	FUNCTIONAL GASTROINTESTINAL DISEASE & IRRITABLE BOWEL SYNDROME	\$18.68	\$15.92	\$14.08	\$10.99	\$5.06	\$13.2
ICD9 CODE		Constipation	\$10.00	910.52	\$14.00	\$10.33	40.00	TIOIL
APG#	814	HEPATOBILIARY DISEASE	\$19.19	\$14.75	\$16.26	\$7.39	\$5.17	\$6.43
ICD9 CODE		Cholelithiasis - calculus of gallbladder without mention of cholecystitis	v 13.19	914.75	410.20	47.00	70.17	70.40
APG#	816	HEMORRHOIDS & OTHER ANAL-RECTAL DISEASES	\$20.54	\$16.37	\$19.38	\$15.82	\$10.12	\$12.3
ICD9 CODE		Other disorders of intestine - hemorrhage of rectum and anus	\$20.54	\$10.37	919.38	\$15.62	\$10.12	914.3
APG#	817	OTHER GASTROINTESTINAL DISEASES	400.00	440.00	\$23,65	\$7.01	\$4.07	\$4.22
ICD9 CODE	789.0	Other symptoms involving abdomen and pelvis - abdominal pain	\$26.33	\$10.98	\$23.05	\$7.01	\$4.07	1 94.22
APG#	827	MAJOR SIGNS, SYMPTOMS & FINDINGS		1105.10	\$37.87	\$25.25	\$23.20	\$19.13
ICD9 CODE	427.5	Cardiac dysrhythmias - cardiac arrest	\$97.09	\$105.48	\$37.87	\$25.25	\$23.20	\$19.1.
APG#	841	BACK DISORDERS						

14		MEAN, MEDIAN, & STANDARD DEVIATION FOR DIRECT LABOR COS		Hos	pitals		Physici	an' Office
				1100	Standard			Standa
MEDICAL		APG & ICD-9 DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
PROCEDURES			\$8.86	\$8,29	\$3.20	\$8.84	\$4.65	\$9.09
ICD9 CODE		Other and unspecified disorders of back - lumbago	70,00					
APG#	842	MUSCULOSKELETAL DISEASES EXCEPT BACK DISORDERS	\$9.73	\$8,46	\$5.47	\$6.05	\$4.54	\$4.28
CD9 CODE	714.0	Rheumatoid arthritis and other inflammatory polyarthropathies - rheumatoid arthritis	\$9.89	\$6.55	\$7.23	\$9.24	\$7.07	\$6.11
CD9 CODE	715.90	Osteoarthrosis and allied disorders - unspecified whether generalized or localized	\$8.73	\$6.31	\$7.36	\$6.74	\$3.69	\$6.33
CD9 CODE	729.5	Other disorders of soft tissues - pain in limb	90.75	+0.01	11100			
APG#	856	DISEASE OF NAILS	\$10.64	\$6.55	\$9.30	\$5.21	\$2.53	\$4.73
ICD9 CODE	110.1		V10.04	+0100	10.00			
APG#	857	CHRONIC SKIN ULCER	\$16.62	\$20,04	\$7.77	\$9.42	\$8,98	\$5.85
ICD9 CODE	707.1	Chronic ulcer of skin - ulcer of lower limbs, except decubitus	\$10.02	720.04	V/.//	70172	10.00	
APG#	858	CELLULITIS, IMPETIGO & LYMPHANGITIS	\$16.88	\$18.31	\$7.76	\$11.61	\$9,33	\$7.56
ICD9 CODE	682.9	Other cellulitis and abscess - unspecified site	\$10.00	910.31	47.70	V11.01	40.00	11111
APG#	859	BREAST DISEASE	AO CE	\$9.82	\$4.48	\$5.94	\$3,92	\$4.32
ICD9 CODE	611.7	Other disorders of breast - signs and symptoms in breast - mastodynia	\$9.65	40.02	77.40	70.54	10.02	
APG#	860	OTHER SKIN DISEASES	\$6.97	\$7.32	\$2,21	\$4,34	\$2.75	\$3.01
ICD9 CODE	217	8enign neoplasm of breast	\$17,16	\$14.83	\$9.59	\$16.74	\$15.17	\$9.88
ICD9 CODE	692.9	Contact dermatitis and other eczema - unspecified cause		\$6,94	\$5.95	\$10.65	\$8.78	\$10.36
ICD9 CODE	696.1	Psoriasis and similar disorders - other psoriasis	\$8.24	\$15.08	\$10.22	\$15.46	\$17.78	\$7.95
ICD9 CODE	709.9	Other disorders of skin and subcutaneous tissue - unspecified	\$16.92	\$28.92	\$16.30	\$15.61	\$7.64	\$13.25
ICD9 CODE	995.3	Certain adverse affects not elsewhere classified - allergy unspecified	\$26.22	\$28.92	\$16.30	\$15.01	97.04	V13.24
APG#	871	DIABETES			110.00	\$14.36	\$8.78	\$14.78
ICD9 CODE	250.00	Diabetes mellitus - without mention of complication	\$15.03	\$12.04	\$13.38	\$14.30	\$0.70	714.70
APG#	872	OBESITY			10.00	\$3.96	\$3.75	\$2.56
ICD9 CODE		Obesity and other hyperalimentation - obesity	\$6.46	\$5.91	\$3.80	\$3.96	\$3.75	\$2.50
APG#	873	ENDOCRINE, NUTRITIONAL & METABOLIC DISEASE EXCEPT DIABETES & OBESITY				45.00	\$3.88	\$5.52
ICD9 CODE	272	Disorders of lippid metabolism	\$7.85	\$8.59	\$2.88	\$5.68	\$3.88	\$5.52
APG#	888	URINARY TRACT INFECTION					40.05	\$4.60
ICD9 CODE	599.0		\$12.27	\$11.02	\$8.37	\$9.24	\$9.05	\$4.00
APG#	887	RENAL FAILURE			-		10.10	140.0
ICD9 CODE	585	Chronic repal failure	\$18.81	\$11.93	\$16.83	\$10.98	\$7.45	\$12.3
APG#	888	URINARY DISEASE EXCEPT URINARY TRACT INFECTION & RENAL FAILURE				11.0.00	1440.00	\$6.63
ICD9 CODE	599.7		\$19.66	\$20.58	\$7.11	\$15.83		
ICD9 CODE	788.2		\$17.65	\$16.02	\$6.93	\$8.61	\$7.24	\$4.29
APG#	901	BENIGN PROSTATIC HYPERTROPHY						10.7
ICD9 CODE	600	Hyperplacia of prostate	\$7.78	\$6.07	\$6.24	\$5.12	\$4.16	\$3.70
APG#	902	MALE REPRODUCTIVE DISEASES EXCEPT BENIGN PROSTATIC HYPERTROPHY						
ICD9 CODE	601.9		\$9.98	\$8.11	\$5.44	\$5.02	\$3.95	\$3.8
APG#	916	FEMALE GYNECOLOGICAL DISEASE				-		
ICD9 CODE		Gynecological examination	\$14.37	\$11.06	\$7.34	\$7.60	\$6.37	\$3.2
APG#	932							-
	043.9		\$15.20	\$14.64	\$5.96	\$4.32	\$3.62	\$2.5
ICD9 CODE	933							-
APG#	429	III-defined descriptions and complications of heart disease	\$16.87	\$13.87	\$8.61	\$4.18	\$3.68	\$2.1
ICD9 CODE		Iron deficiency anemias - unspecified	\$14.86	\$9.82	\$9.36	\$2.94	\$3.12	\$0.9
ICD9 CODE	200.5	Other deficiency anemias - unspecified	\$8.35	\$9.00	\$2.77	\$3.05	\$3.37	\$1.1
ICD9 CODE	201.5	Diffuse diseases of connective tissue - systemic lupus erythematosus	\$9.71	\$8.35	\$6.22	\$8.73	\$8.91	\$5.2
ICD9 CODE	946	ADULT MEDICAL EXAMINATION						
APG#	946	Routine general medical examination at a health care facility	\$11.78	\$11.85	\$6.18	\$6.77	\$6.37	\$2.2
ICD9 CODE								
APG#	947	WELL CHILD CARE  Routine infant or child health check	\$16.40	\$15.60	\$10.12	\$6.45	\$5.05	\$3.02

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## APPENDIX I

-				Hos	pitals		Physici	an' Office
MEDICAL					Standard			Standard
PROCEDURES		APG & ICD-9 DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	949	CONTRACEPTION & PROCREATIVE MANAGEMENT						
ICD9 CODE	V25.09	General counseling and advice; other (family planning advice)	\$12.54	\$8.34	\$9.65	\$3.25	\$3.10	\$1.72
APG#	950	REPEAT PRESCRIPTION						
ICD9 CODE	V68.1	Issue of repeat prescriptions	\$2.90	\$3.03	\$1.60	\$3.30	\$2.68	\$1.81
APG#	951	NONSPECIFIC SIGNS & SYMPTOMS & OTHER CONTACTS WITH HEALTH SERVICES						
ICD9 CODE	V67.0	Follow-up examination following surgery	\$11.72	\$11.42	\$9.03	\$7.47	\$7.37	\$3.19
ICD9 CODE	V67.2	Follow-up examination following chemotherapy	\$18.29	\$15.60	\$13.16	\$6.94	\$7.31	\$1.70
APG#	976							
ICD9 CODE	V22.2	Normal pregnancy; pregnant state, incidental	\$14.27	\$11.75	\$12.80	\$6.42	\$2.66	\$8.12
		AGGREGATE MEAN FOR ALL MEDICAL PROCEDURES	\$17.15	\$15.22	\$11.38	\$8.46	\$7.05	\$5.86

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	-			Hos	spitals		Physici	an' Office
MEDICAL					Standard			Standard
PROCEDURES		APG & ICD-9 DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	631	HEAD & SPINE INJURY						
ICD9 CODE	854.00	Intracranial injury of other an unspecified nature, with out mention of open intracranial wound	\$50.68	\$49.75	\$40.09	\$7.38	\$7.38	\$4.90
APG#	634	OTHER INJURIES						
ICD9 CODE	897.0	Traumatic amputation of leg(s) (complete) (partial) unilateral, below knee/out mention of complication	\$6.23	\$6.23	\$2.91	\$11.31	\$11.31	\$4.50
APG#	646							
ICD9 CODE	312.9	Undersocialized conduct disorder, aggressive type, unspecified disturbance of conduct	\$7.20	\$6.55	\$4.59	\$65.94	\$65.94	N.A.
APG#	647							
ICD9 CODE	319.0	Unspecified mental retardation	\$9.93	\$9.11	\$4.36	\$10.89	\$10.89	\$5.16
APG#	650							
ICD9 CODE	V70.2	General psychiatric examination, requested by the authority	\$74.77	\$74.77	\$96.75	N.A.	N.A.	N.A.
APG#	663							
ICD9 CODE	292.0	Drug psychoses, drug withdrawal syndrome	\$32.83	\$12.08	\$36.12	\$3.50	\$1.96	\$3.25
APG#	676	NEONATE & CONGENITAL ANOMALY		1				
ICD9 CODE	760.0	Fetus or newborn affected by maternal condition which may be unrelated to present pregnancy, maternal by	\$22.21	\$30.43	\$16.68	\$7.66	\$4.39	\$8.24
APG#	948	COUNSELING						
ICD9 CODE	V65.5	Person with feared complaint in whom no diagnosis was made	\$15.85	\$16.73	\$7.11	\$25.91	\$25.91	N.A.
APG#	961							
ICD9 CODE	V72.5	Radiological examination, not elsewhere classified	\$17.65	\$17.65	\$21.97	\$6.75	\$5.43	\$2.99

	MEAN, MEDIA	N, STANDAR	DEVIATION	& COUNT FOR	R DIRECT LA	BOR COSTS -	MEDICAL PRO	OCEDURES	
		T		Hospitals				Physician' Offic	
MEDICAL			1	Standard				Standard	
PROCEDURES		Mean	Median	Deviation	Count	Mean	Median	Deviation	Count
APG#	601								
ICD9 CODE	204.0	\$28.24	\$26.77	\$17.75	4	\$10.39	\$7,88	\$10.78	5
APG#	602	-	1				71100		
ICD9 CODE	185	\$11.60	\$6.07	\$10.57	5	\$12.07	\$11.00	\$9.45	9
APG#	603								
ICD9 CODE	162.9	\$18.02	\$11.06	\$14.21	7	\$7.12	\$4.39	\$5.60	8
APG#	604							1000	
ICD9 CODE	173.9	\$16.81	\$15.18	\$12.44	5	\$12.37	\$12.51	\$9.27	7
APG#	605		110110			112101	112101	TOIL	
ICD9 CODE	174.9	\$16.70	\$8.34	\$16.16	7	\$9,13	\$2.78	\$11,47	8
APG#	616	V10.70	V0.54	V10.10		90.13	72.70	711,47	
ICD9 CODE	989.5	\$34.96	\$28.92	\$28.14	5	\$35.71	\$43.98	\$25,63	4
APG#	631	934.30	V20.32	V20.14		933.71	743.30	920.03	
ICD9 CODE	854.00	\$50.68	\$49.75	\$40.09	4	\$7.38	\$7.38	\$4.90	2
APG#	632	+55.00	7.70.70	++0.03		77.30	V7.30	V-7.50	
ICD9 CODE	883.0	\$18.30	\$24.31	\$13.32	9	\$9.66	\$11.22	\$4,94	8
ICD9 CODE	V58.3	\$13.62	\$12.58	\$6.17	15	\$7.53	\$6.60	\$4.04	7
APG#	633	713.02	V12.30	70.17	- 10	47.03	\$0.00	34.04	
ICD9 CODE	820.8	\$23.42	\$28.92	\$17.06	5	\$12.95	\$7,29	\$15,42	8
APG#	634	723.42	920.52	\$17.00		\$12.55	\$7.25	915.42	
ICD9 CODE	897.0	\$6.23	\$6.23	\$2.91	2	\$11.31	\$11.31	\$4.50	2
APG#	646	90.23	90.23	92.91		911.31	\$11.31	\$4.50	
ICD9 CODE	312.9	\$7,20	\$6,55	\$4.59	3	\$65.94	\$65.94		
APG#	647	\$7.20	\$6.55	\$4.59	3	\$65.94	\$65.94	N.A.	2
ICD9 CODE	319.0	\$9.93	\$9.11	\$4,36	3		1		
APG#	648	99.93	99.11	94.36		\$10.89	\$10.89	\$5.16	2
ICD9 CODE	290.0	\$23,41	\$18.31	\$16.51	7	11.00	\$4.89		5
APG#	649	\$23.41	\$18.31	\$10.51		\$4.63	\$4.89	\$1.85	5
		400.05	110.00						
ICD9 CODE	300.0	\$20.05	\$18.86	\$14.10	7	\$4.95	\$4.39	\$1.74	8
APG#	650								
ICD9 CODE	V70.2	\$74.77	\$74.77	\$96.75	2	N.A.	N.A.	N.A.	1
APG#	661								
ICD9 CODE	305.90	\$58.42	\$35.21	\$57.75	7	\$7.19	\$7.19	\$0.57	2
APG#	662								
ICD9 CODE	303.90	\$21.92	\$19.92	\$13.42	5	\$5.94	\$6.78	\$4.03	5
APG#	663								
ICD9 CODE	292.0	\$32.83	\$12.08	\$36.12	3	\$3.50	\$1.96	\$3.25	3
APG#	676								
ICD9 CODE	760.0	\$22.21	\$30.43	\$16.68	3	\$7.66	\$4.39	\$8.24	3
APG#	691								
CD9 CODE	V22.1	\$12.39	\$12.27	\$10.18	4	\$6.60	\$5.45	\$3.87	6
APG#	692								
CD9 CODE	644.13	\$42.82	\$36.07	\$29.27	5	\$10.74	\$10.07	\$2.36	5
APG#	693								
CD9 CODE	V24.2	\$10.20	\$10.02	\$5.14	4	\$5.60	\$4.49	\$3.24	6
APG#	694								
CD9 CODE	646.80	\$19.65	\$24.92	\$13.64	3	\$8.09	\$7.19	\$5.19	6
APG#	721								
CD9 CODE	136.9	\$9.31	\$7.32	\$5.84	7	\$5.26	\$3.62	\$4.65	5

APG#

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## Note to Appendix J

Appendix J contains a table of the mean and standard deviation for direct labor costs by facility type and volume of surgical procedures. The number of hospitals in the study sample by annual volume of surgical procedures is as follows: Volume 1000 - 2999, n = 1; Volume 3000 - 5999, n = 13; and Volume >6000, n = 15. The number of ASCs in the study sample by annual volume of surgical procedures is as follows: Volume 1000 - 2999, n = 11; Volume 3000 - 5999, n = 11; and Volume >6000, n = 10.

	MEAN	AND STANDARD DEVIATION	FOR DI	RECT LAE	OR COS	TS BY FA	CILITY T	YPE AND	VOLUM	- SURGI	CAL PRO	CEDURE	S	
								Direct La	oor Costs					
					Hosi	pitals					A.S	.C.s		
			Vo	lume	Vol	ume	Vol	ume	Vol	ume	Vol	ume	Vol	lume
				-2999)	13000	-5999)	(60)	00+)	(1000	-2999)	(3000	-5999)	(600	00+)
			(1000	Standard	10000	Standard		Standard		Standard		Standard		Standard
SURGICAL		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
PROCEDURES		SUPERFICIAL NEEDLE BIOPSY & ASP		Deviation	IVICUIT	Deviation	1110011							
APG#	2		\$B0.25	\$65.56	\$63.48	\$22.67	\$55.35	\$1.B9	\$85.68	N.A.	\$67.53	\$35.45	\$35.99	N.A.
CPT CODE		Puncture Aspiration of Cyst of Breas	10000		\$179.14	\$134.21	\$157.94	N.A.	\$90.38	N.A.	\$B1.92	\$39.58	\$B7.56	\$62.83
CPT CODE		Biopsy of breast, needle (separate pr	N.A.	N.A.		N.A.	\$119.15	N.A.	N.A.	N.A.	N.A.	N.A.	\$152.10	N.A.
CPT CODE		Biopsy, thyroid, percutaneous needl	N.A.	N.A.	\$69.1B	N.A.	\$119.15	IV.A.	14.74.	14.75.	14.75.	14.74	TIGETIC	
APG#	3	SIMPLE INCISION & DRAINAGE				10.00	105.70	\$32.54	\$7B.16	N.A.	\$105.87	\$54.34	\$105.93	\$40.61
CPT CODE			\$136.11	\$51.19	\$107.97	\$51.B5	\$B5.72		\$94.16	\$2.26	\$69.85	\$25.66	\$99.48	\$46.77
CPT CODE		Incision and drainage of abscess (e.g.		\$49.51	\$11B.34	\$42.9B	\$117.02	\$2.53				\$27.60	\$142.37	\$32.62
CPT CODE	10120	Incision & removal of foreign body s	\$130.00	\$4B.90	\$142.75	\$26.68	\$B4.17	\$43.39	\$76.95	\$24.B1	\$94.46	\$27.60	9142.37	932.02
APG#	4	COMPLEX INCISION AND DRAINAGE									1100 00	400.70	4405.00	ACE 22
CPT CODE	10141	Incision and drainage of hematoma;	\$151.53	\$33.2B	\$150.94	\$56.12	\$140.15	N.A.	\$101.03	\$12.76	\$106.55	\$38.76	\$165.32	\$65.23
CPT CODE		Incision and drainage, complex, post		\$69.61	\$196.68	\$91.64	\$140.91	\$12.56	\$148.8B	N.A.	\$111.78	\$42.20	\$211.45	N.A.
CPT CODE		Incision and drainage, upper arm or	\$115.00	\$39.86	\$154.1B	\$19.34	\$133.47	\$9.44	\$123.28	N.A.	\$115.30	\$31.70	\$202.74	N.A.
CPT CODE		Deep dissection below fascia, for de	\$197,32	\$93.30	\$149.17	\$51.12	\$139.26	N.A.	N.A.	N.A.	\$169.17	\$28.77	\$130.44	N.A.
APG#	5	COMPLEX INCISION AND DRAINAGE												
CPT CODE		Debridement of nails, manual; five o		\$46.04	\$74.99	\$15.53	\$90.32	\$11.5B	\$90.38	N.A.	\$95.88	\$19.90	\$101.32	\$3.42
CPT CODE		Debridement of nails, manual each a		\$36.46	\$95.71	\$37.17	\$90.32	\$11.58	\$90.38	N.A.	\$110.60	\$5.71	\$101.32	\$3.42
	6	SIMPLE DEBRIDEMENT & DESTRUCT		100										
APG#		Debridement of skin, partial thicknes		\$48.78	\$119.94	\$55.26	\$10B.11	N.A.	\$B0.9B	N.A.	\$10B.82	\$24.76	\$148.61	\$62.91
CPT CODE			\$124.23	\$35.B2	\$B2.B8	\$28.27	\$90.32	\$11.58	\$70.46	N.A.	\$78.B0	\$35.98	\$107.78	\$49.05
CPT CODE				\$23.53	\$100.65	\$29.65	\$94.17	\$19.71	\$80.98	N.A.	\$105.36	\$17.03	\$115.BO	\$50.13
CPT CODE		Destruction by any method, with or		\$69.95	\$142.75	\$49.38	\$131.84	\$22.88	\$115.84	\$28.74	\$105.50	\$54.06	\$167.29	\$41.2B
CPT CODE		Removal of implant superficial, (e.g.,	\$193.14	\$69.95	9142.70	945.50	V131.04	722.00	+11010+	VEGIT :	1			
APG#	7	SIMPLE EXCISION & BIOPSY		100.05	\$105.66	\$41.29	\$87.04	\$27.68	\$73.50	\$21.81	\$109.BB	\$15.64	\$109.49	\$22.54
CPT CODE	11401	Excision, benign lesion, except skin t		\$23.95			\$80.25	\$33.41	\$B1.57	\$3B.9B	\$90.12	\$24.08	\$110.34	\$1B.77
CPT CODE		Excision, other benign lesion (unless		\$45.94	\$10B.54	\$43.77		\$36.31	\$99.78	N.A.	\$92.B6	\$22.30	\$109.15	\$24.24
CPT CODE			\$110.34	\$42.5B	\$109.36	\$4B.43	\$76.B9				\$97.14	\$23.36	\$132.84	\$35.84
CPT CODE	11642	Excision, malignant lesion, face, ear		\$41.B2	\$127.97	\$76.67	\$B3.86	\$30.40	\$98.41	\$26.17	\$97.14	\$23.30	\$132.04	933.04
APG#	В	COMPLEX EXCISION, BIOPSY & DEB										100.00	111010	440.00
CPT CODE	. 11404	Excision, benign lesion, except skin t	\$116.16	\$21.00	\$120.07	\$41.60	\$7B.B1	\$56.5B	\$B6.90	\$34.71	\$95.33	\$29.33	\$118.43	\$1B.90
CPT CODE	:11406	Excision, benign lesion, except skin t	\$112.1B	\$13.77	\$117.72	\$42.60	\$B2.7B	\$40.59	\$86.17	\$42.62	\$114.57	\$40.89	\$109.B3	\$31,13
CPT CODE	11643	Excision, malignant, lesion, face, ear	\$123.49	\$47.84	\$132.B2	\$59.97	\$93.97	\$28.31	\$107.33	\$12.50	\$91.13	\$32.93	\$140.59	\$34.09
APG#	9	LIPECTOMY & EXCISION WITH RECO	ONSTRUC'	TION										
CPT CODE	15839	Excision, excessive skin and subcuta		\$59.B5	\$181.50	\$67.57	\$164.17	N.A.	\$150.28	N.A.	\$142.40	\$71.64	N.A.	N.A.
CPT CODE		Excision, leg pressure ulcer, with loc		\$52.71	\$217.00	\$79.66	\$164.17	N.A.	N.A.	N.A.	\$180.99	\$12.32	\$28B.30	N.A.
CPT CODE		Ligation and division and completion		\$66.33	\$230.41	\$B1.26	N.A.	N.A.	N.A.	N.A.	\$255.83	\$13.41	\$352.47	N.A.
APG#	10	SIMPLE SKIN REPAIR												
CPT CODE	12001		\$137.62	\$42.6B	\$94.21	\$41.05	\$44.22	\$20.50	\$91.10	\$24.72	\$106.76	\$18.9B	\$99.00	N.A.
CPT CODE		Simple repair of superficial wounds	\$9B.1B	\$44.B2	\$107.6B	\$38.00	\$44.22	\$20.50	\$76.96	\$5.05	\$131.75	\$28.79	\$91.53	\$10.56
		Layer closure of wounds of scalp axi		\$52.BB	\$127.40	\$67.70	\$108.11	N.A.	\$100.34	\$24.81	\$106.37	\$56.17	\$125.99	N.A.
CPT CODE	12031	COMPLEX SKIN REPAIR	7104.40	102.00										
APG#		Simple repair or superficial wounds	\$142.34	\$43.23	\$104.95	\$49.35	\$63.28	\$63.39	\$10B.58	N.A.	\$117.77	\$11.45	\$119.20	N.A.
CPT CODE			\$90.7B	\$34.15	\$116.05	\$74.50	\$89.18	\$100.01	\$113.88	N.A.	\$136.23	\$23.76	\$168.67	N.A.
CPT CODE	12017	Simple repair or superficial wounds		\$B0.01	\$134.94	\$83.52	\$126.80	N.A.	N.A.	N.A.	\$139.74	\$35.66	\$146.52	N.A.
CPT CODE		Layer closure of wounds of face, ear	9157.92	\$26.23	\$177.39	\$61.15	\$176.46	N.A.	\$143.91	\$52.55	\$135.18	\$49.76	\$165.89	\$66.10
CPT CODE	15B22	8lepharoplasty, upper cyclid	\$106.50			VOI.15	9170.40	IT.A.	V 1-3.31	+52.55	7.00.10	1,3.70		
APG#	12	SKIN & INTEGUMENT GRAFT, TRAN				450.33	4100.00	N.A.	\$161.74	\$45.57	\$140.99	\$4B.96	\$190.42	\$57.97
CPT CODE	14060	Adjacent tissue transfer or rearrange	\$187.BB	\$71.15	\$195.52	\$53.77	\$189.09	IN.A.	19101.74	940.07	7140.99	V40.90	V130.42	407.57

	MEAN	AND STANDARD DEVIATION	FOR DI	RECT LA	OR COS	IS BY FA	CILITY			E - 30NG	OAL THE	CEDUNE		
								Direct La	bor Costs					
	1					pitals						.C.s		
			Vo	lume		ume		lume		ume		ume		lume
			(1000	-2999)	(3000	-5999)	(60)	00+)	(1000	-2999)	(3000	-5999)	(60)	00+)
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	15100	Split graft, trunk, scalp, arms, legs,	\$193.67	\$64.08	\$212.72	\$83.92	\$225.47	\$1,41	\$131.44	\$0.05	\$159.65	\$76.14	\$203.89	\$48.00
CPT CODE	15260	Full thickness graft, free, including d	\$220.39	\$64.36	\$219.45	\$74.38	\$181.15	\$61.26	\$242.78	N.A.	\$155.65	\$61.80	\$276.40	\$62.19
APG#	27	SIMPLE INCISION & EXCISION OF 8F												
CPT CODE	19101	Biopsy of breast, incisional	\$173.86	\$61.58	\$153.68	\$43.89	\$137.07	\$23.43	\$121.19	\$2.96	\$124.13	\$39.01	\$147.25	\$38.20
CPT CODE		Excision or cyst, fibroadenoma, or ot	\$126.94	\$31.25	\$142.89	\$36.44	\$130.47	\$25.16	\$105.69	\$17.21	\$127.41	\$29.38	\$123.42	\$68.85
APG#	28	BREAST RECONSTRUCTION & MAS												
CPT CODE		Mastectomy for gynecomastia throu		\$56.78	\$205.08	\$110.80	\$129.35	\$37.46	\$118.86	\$26.20	\$134.12	\$44.26	\$155.53	\$14.23
CPT CODE		Mastectomy, partial	\$197.27	\$105.98	\$195.74	\$111.03	\$171.83	\$51.94	\$113.20	\$7.23	\$156.61	\$75.37	\$194.13	\$83.50
CPT CODE		Mastectomy, subcutaneous	\$198.18	\$65,85	\$173.25	\$84.17	\$150.49	\$26.35	\$107.59	N.A.	\$177.98	\$32.64	\$165.58	\$66.97
APG#	53	OCCUPATIONAL THERAPY						1						
CPT CODE		Training in activities of daily living (s	\$29,44	\$21.43	\$37.22	\$12.57	\$35.89	\$24.86	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	97541			N.A.	N.A.	N.A.	\$15.45	\$9.05	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	54	PHYSICAL THERAPY												
CPT CODE		Physical medicine treatment to one	\$30.02	N.A.	\$23.56	N.A.	\$25.86	\$10.77	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Physical medicine treatment to one	\$20.77	N.A.	\$16.23	N.A.	\$17,12	\$7.27	N.A.	N.A:	N.A.	N.A.	N.A.	N.A.
APG#	55	DIAGNOSTIC ARTHROSCOPY	720177		1									
CPT CODE		Arthroscopy, shoulder, diagnostic, w	\$224.25	\$93.02	\$197.99	\$72.25	\$205.94	\$19.07	\$173.89	\$79.05	\$153.56	\$59.89	\$197.63	\$30.99
CPT CODE		Arthroscopy, knee, diagnostic, with		\$67.86	\$173.16	\$43.00	\$158.93	\$7.04	\$144.97	\$33.13	\$146.25	\$61.11	\$179.11	\$55.58
APG#	56	THERAPEUTIC ARTHROSCOPY	V130.00	407.00	4170110	1.0.00	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					1		
		Arthroscopy, knee, surgical debride	6195 97	\$41.16	\$176.26	\$39.31	\$167.85	\$15.05	\$158.00	\$41.38	\$135.32	\$40.10	\$180.27	\$65.29
CPT CODE	29877	Arthroscopy, knee, surgical debite	\$182.61	\$75.13	\$194.49	\$42.23	\$207.98	\$37.97	\$153.85	\$49,49	\$162.47	\$33.52	\$190.07	\$54.82
CPT CODE		REPLACEMENT OF CAST	9102.01	775.13	V134.43	V-72.25	4207.00	707107	*100100		11000			
APG#	57		A110 00	\$62.92	\$78.85	\$65.62	\$58.60	\$43.21	\$80.97	\$26.59	\$112.20	N.A.	\$72.25	\$9.40
CPT CODE		Application elbow to finger (short ar	\$115.51	\$66.79	\$64.41	\$48.39	N.A.	N.A.	\$70.49	\$16.40	\$81,44	\$43.49	\$101.33	N.A.
CPT CODE		Application		\$00.75	304.41	740.55	14.0.	140231	470170		101111			
APG#	58	SPLINT, STRAPPING & CAST REMO		\$62,13	\$61.37	\$55.50	\$76.47	\$29.15	\$73.28	\$37.48	\$99.18	\$18.41	\$74.48	\$28.16
CPT CODE		Application of short arm splint (forea	\$31.07	N.A.	\$21.62	N.A.	\$9.34	N.A.	\$45.80	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Strapping unna boot TREATMENT OF CLOSED FRACTUR					¥5.04	14.74	1 10100	140.11				
APG#	59			\$37.07	\$51.50	\$48.25	\$18.69	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Treatment of rib fracture, closed, un		\$48.60	\$100.96	\$63.38	\$54.72	\$59.91	\$95.08	N.A.	\$104.78		\$80.62	\$19.47
CPT CODE		Treatment of closed phalangeal shaf	\$80.40					955.51	435.00	14.0.	V104.70	417.40	700102	******
APG#	60	TREATMENT OF CLOSED FRACTUR		\$63.45	\$121.72	\$40.59	\$118.96	\$30.95	\$93.56	\$48.68	\$137.74	\$11.16	\$141.73	\$44,15
CPT CODE		Treatment of closed distal radial frac		\$64.22	\$132.14	\$21.42	\$117.42	\$28.77	\$122.68	\$15.80	\$116.39	\$10.82	\$121,71	\$38.64
CPT CODE		Treatment of closed distal radial frac				\$47.16	\$72.66	\$34.53	\$151.49	N.A.	\$81.93	\$19.86	\$80.73	\$56.09
CPT CODE		Treatment of closed metatarsal fract	\$92.67	\$44.23	\$112.43	\$47.16	\$72.00	\$34.53	\$101.49	IV.A.	901.33	\$13.00	000.73	400.00
APG#	62	TREATMENT OF OPEN FRACTURE 8			FACE	457.00	\$161.95	N.A.	N.A.	N.A.	\$210.83	\$25.70	\$179.24	N.A.
CPT CODE		Treatment of open distal radial fract		\$91.72	\$223.40	\$57.62		\$5.03	\$195.45	N.A.	\$196.20	\$63.17	\$245.61	\$70.35
CPT CODE		Open treatment of closed or open di		\$88.47	\$213.66	\$43.57	\$154.38			N.A.	\$187.89	\$33.35	\$162.88	
CPT CODE		Open treatment of closed or open ph		\$83.79	\$198.46	\$58.26	\$115.96	\$59.37	\$159.42	N.A.	9107.09	433.33	V102.00	V13.50
APG#	63	JOINT MANIPULATION UNDER ANE			4400 :-	400.05	4400.00	A1 A	407.00	\$30,79	\$114.98	\$49.87	\$148.66	\$47.00
CPT CODE		Manipulation under anesthesia, shou		\$45.53	\$102.46	\$30.66	\$133.03	N.A.	\$67.99			\$50.23	\$148.65	
CPT CODE		Manipulation of knee joint under gen		\$35.66	\$74.44	\$29.48	\$78.09	\$57.59	\$117.37	N.A.	\$108.66	950.23	9128.05	929.70
APG#	64	SIMPLE MAXILLOFACIAL PROCEDU					1400 C	1	4470 ( )		4450.00	42.45	\$153.26	\$37,72
CPT CODE	30000	Drainage of hematoma, nasal, intern	\$158.24	\$49.27	\$130.21	\$58.68	\$127.51	N.A.	\$170.14	N.A.	\$159.36	\$3.15		
CPT CODE	30110	Excision, nasal polyp(s), simple unila	\$148.98	\$58.00	\$136.55	\$48.44	\$145.58	N.A.	\$109.18	N.A.	\$155.62	\$50.59	\$129.75	\$42.72
CPT CODE	30111	Excision, nasal polyp(s), simple bilat	\$183.37	\$69.16	\$177.73	\$64.51	\$127.60	N.A.	\$123.28	N.A.	\$140.06	\$54.67	\$142.82	\$69.61

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	MEAN	AND STANDARD DEVIATION	FOR DI	RECT LA	OR COS	IS BY FA	CILITY			E - SURGI	CAL PAC	CEDURE	3	
								Direct La	bor Costs					
						pitals						.C.s		
			Vo	ume		lume		lume		ume	Vol			lume
			(1000	-2999}	(3000	)-5999)	(60	00+)	(1000	-2999)	(3000	-5999)	(60)	00+)
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	31020	Sinusotomy, maxillary (antrotomy); i	\$194.34	\$89.83	\$211.71	\$90.12	\$133.96	\$1.20	\$149.00	\$43.21	\$180.93	\$70.44	\$228.56	\$53.53
APG#	65	COMPLEX MAXILLOFACIAL PROCED	URES											
CPT CODE	30520	Septoplasty or submucous resection	\$228.33	\$68.94	\$189.82	\$56.49	\$176.47	\$16.26	\$148.84	\$42.74	\$164.10	\$53.26	\$213.22	\$66.59
CPT CODE	: 30620	Reconstruction, functional, internal	\$237.02	\$70.92	\$200.52	\$71.77	\$180.78	\$30.72	\$197.89	\$53.82	\$172.07	\$66.69	\$228.73	\$45.57
APG#	66	INCISION OF BONE, JOINT, & TENDO	NC											
CPT CODE	25000	Tendon sheath incision at radial styl	\$165.84	\$71.36	\$141.61	\$57.70	\$121.15	\$42.93	\$115.21	\$28.69	\$109.01	\$40.94	\$126.54	\$44.82
CPT CODE	28270			\$67.86	\$182.46	\$85.92	\$139.26	N.A.	\$115.81	\$13.95	\$163.73	\$9.00	\$150.22	\$10.46
APG#	67	BUNION PROCEDURES								1				
CPT CODE	28290	Hallux valgus (bunion) correction, wi	\$152.95	\$37.22	\$174.07	\$51.16	\$179.72	\$4.38	\$128.88	\$43.56	\$143.40	\$65.00	\$148.50	\$41.51
CPT CODE		Hallux valgus (bunion) correction, wi	\$150.29	\$43.07	\$170.63	\$55.33	\$194.19	\$24.83	\$131.24	\$27.34	\$146.22	\$68.32	\$157.79	\$38.91
APG#	68	EXCISION OF BONE, JOINT & TENDO	ON OF THE	HAND & F	00Т									
CPT CODE	26160	Excision or lesion of tendon sheath o		\$37.74	\$132.73	\$38.86	\$109.38	\$43.50	\$96.68	\$25.28	\$98.59	\$34.74	\$112.36	\$22.73
CPT CODE	28080	Excision of interdigital (Morton) neur	\$151.04	\$53.18	\$138.59	\$42.28	\$145.04	\$8.17	\$115.17	\$22.12	\$121.24	\$44.49	\$139.74	\$15.26
APG#	69	EXCISION OF 80NE , JOINT & TEND	ON EXCEP	T HAND &	FOOT				1					
CPT CODE	24105	Excision, olecranon bursa	\$153.08	\$45.16	\$170.10	\$28.93	\$145.04	\$8.17	\$96.49	N.A.	\$121.96	\$37.18	\$140.65	\$24.27
CPT CODE	27345	Excision of synovial cyst of popiteal	\$175.02	\$65.94	\$157.03	\$43.91	\$139.26	N.A.	\$103.85	\$7.53	\$138.11	\$51.33	\$126.11	\$41.18
APG#	70	ARTHROPLASTY												
CPT CODE	25447	Interposition arthroplasty, intercarpal	\$172.41	\$52.21	\$166.44	\$42.97	\$115.96	\$59.37	\$99.78	N.A.	\$129.66	\$24.59	\$131.60	N.A.
CPT CODE		Arthroplasty interphalangeal joint; si		\$58.20	\$161.81	\$52.70	\$127.58	\$46.56	N.A.	N.A.	\$123.57	\$30.85	\$161.88	\$16.15
APG#	71	HAND & FOOT TENOTOMY											1	
CPT CODE		Tenotomy, flexor, single, finger ope	\$134.17	\$33.68	\$128.59	\$21.32	\$109.38	\$43.50	\$113.19	\$27.57	\$107.40	\$27.89	\$84.82	\$34.75
CPT CODE		Tenotomy, open, extensor, foot or t		\$60.22	\$138.73	\$30.75	\$139.26	N.A.	\$154.98	N.A.	\$171.29	\$62.08	\$139.40	\$0.57
APG#	72	SIMPLE HAND & FOOT REPAIR EXC		OMY					1	l				
CPT CODE	26055	Tendon sheath incision for trigger fin	\$130.06	\$37.36	\$109.01	\$55.21	\$86.09	\$52.00	\$105.64	\$16.98	\$92.89	\$27.90	\$96.52	\$21.84
CPT CODE		Hammertoe operation, one tow (e.g.		\$35.35	\$161.67	\$32.59	\$160.30	\$13.34	\$117.27	\$28.55	\$127.69	\$37.74	\$149.43	\$40.28
APG#	73	COMPLEX HAND & FOOT REPAIR			1									
CPT CODE		Arthrodesis, interphalangeal joint; wi	\$189.41	\$79.06	\$212.78	\$70.90	\$172.53	\$20.64	\$153.19	\$30.96	\$155.28	\$75.43	\$208.24	\$41.46
CPT CODE	28810	Amputation, metatarsal, with toe, si	\$149.64	\$43.03	\$140.37	\$33.50	\$137.03	\$3.15	\$158.47	N.A.	\$134.09	\$16.81	\$139.06	\$22.87
APG#	74	REPAIR, EXCEPT ARTHROTOMY, OF	BONE, JO	INT, TENDO	ON EXCEPT	OF HAND	& FOOT							
CPT CODE		Repair of complete shoulder (rotator)		\$83.80	\$313.19	\$135.64	\$161.95	N.A.	\$216.91	N.A.	\$193.43	\$71.89	\$212.39	N.A.
CPT CODE		Repair, tendon or muscle, flexor, for		\$68.71	\$180.54	\$40.37	\$149.05	\$12.58	\$122.31	\$47.04	\$163.37	\$61.07	\$144.98	\$43.92
APG#	75	ARTHROTOMY EXCEPT OF HAND &					1			İ				1
CPT CODE		Arthrotomy, knee, for excision of se		\$79.50	\$195.35	\$43.79	\$131.47	\$27.37	N.A.	N.A.	\$194.04	\$6.65	\$210.09	\$16.31
CPT CODE		Arthrotomy, knee, for excision of se		\$27,40	\$192.26	\$62.87	\$112.12	N.A.	N.A.	N.A.	\$194.06	\$20.72	\$213.20	\$10.15
APG#	76	ARTHROCENTESIS & LIGAMENT OR		NJECTION										
CPT CODE		Injection, tendon sheath, ligament, t		\$21.95	\$89.26	\$37.94	\$120.57	N.A.	\$64.13	\$63.70	\$87.10	\$32.00	\$98.91	N.A.
CPT CODE	20605	Arthrocentesis, aspiration and/or inje	\$179.56	\$6.03	\$120.58	\$74.23	\$130.36	\$13.85	\$99.78	N.A.	\$128.90	\$1.20	\$95.44	\$23.40
CPT CODE		Arthrocentesis, aspiration and/or inje		\$32.22	\$111.06	\$48.66	\$120.57	N.A.	N.A.	N.A.	\$120.09	\$15.29	\$129.31	\$49.39
APG#	77	SPEECH THERAPY												T
CPT CODE		Speech, language or hearing therapy	\$68.26	\$18.94	\$42,65	\$7.44	\$31.92	\$4.46	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Speech, language or hearing therapy		N.A.	\$43.95	\$2.71	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	79	PULMONARY TEST & THERAPY EXC			1.000	1 200	1	1		1				
		Intermittent positive pressure breath		N.A.	\$13.91	\$2.32	\$9.84	\$2.88	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Noninvasive ear or pulse oximetry fo		\$1.00	\$5.89	\$1.39	\$9.19	\$5,95	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	34/00	NEEDLE & CATHETER BIOPSY, ASPI					1	1	-	-			_	1

	MEAN	AND STANDARD DEVIATION	FOR DI	RECTLA	SOR COS	I S RA FA	CILITY			E - SURG	ICAL PRO	CEDURE	0	
								Direct La	bor Costs					
	-					pitals						C.s		
			Vo	lume		ume		ume		lume		lume		lume
			(1000	)-2999)	(3000	-5999)	(60)	00+)	(1000	-2999)	(3000	-5999)	(60)	00+)
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	32000	Thoracentesis, puncture or pleural c	\$109.59	\$58.96	\$105.08	\$56.47	N.A.	N.A.	N.A.	N.A.	\$133.24	N.A.	N.A.	N.A.
CPT CODE			\$170.25	\$51.52	\$144.15	\$114.30	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	81	SIMPLE ENDOSCOPY OF THE UPPER												
CPT CODE		Laryngoscopy, indirect (separate pro		\$40.99	\$113.90	\$61.40	\$103.73	\$5.95	\$90.38	N.A.	\$115.41	\$50.15	\$93.14	\$21.40
CPT CODE		Laryngoscopy, indirect (separate pro		\$34.41	\$124.60	\$53.36	\$103.73	\$5.95	\$90.38	N.A.	\$155.94	\$70.53	\$93.14	\$21.40
APG#	82	COMPLEX ENDOSCOPY OF THE UPP		Y										
CPT CODE		Laryngoscopy, direct, operative with		\$48,48	\$147.84	\$64.91	\$105.71	\$30.28	\$131.01	\$17.59	\$129.51	\$14.55	\$132.25	\$46.01
CPT CODE		Laryngoscopy, direct, operative, wit		\$52.91	\$150.31	\$40.23	\$121.37	\$19.00	\$129.65	\$22.30	\$142.84	\$29.91	\$139.49	\$45.79
	83	SIMPLE ENDOSCOPY OF THE LOWER		402101										
APG#		Bronchoscopy diagnostic, (flexible or		\$39.35	\$130.90	\$39.45	\$100.02	\$21,48	\$107.36	\$26.25	\$144.11	\$53.11	\$84.96	N.A.
CPT CODE			\$128.47	\$39.29	\$126.95	\$25.68	\$99.19	\$27.99	\$136.17	N.A.	\$142.90	\$8.31	\$88.44	N.A.
CPT CODE		Bronchoscopy with biopsy  COMPLEX ENDOSCOPY OF THE LOV			4120.00	720100	100110					1		
APG#	84				\$138.10	\$55.27	\$143,47	\$135.74	\$140.88	N.A.	\$223.54	N.A.	N.A.	N.A.
CPT CODE	31628	Bronchoscopy w/ transbronchial lun	\$140.99	\$15.60	\$144.00	\$33.59	\$185.34	\$156.94	N.A.	N.A.	\$150.77	N.A.	N.A.	N.A.
CPT CODE		Bronchoscopy with transbronchial n		\$15.60	\$144.00	\$33.09	9100.34	7130.34	1100	14000	4150,77	11071		14
APG#	85	NASAL CAUTERIZATION & PACKING		440.00	\$161,31	\$34.65	\$95.23	\$40.38	\$73.21	N.A.	\$144.24	\$40.12	\$181.35	N.A.
CPT CODE		Control nasal hemorrhage, anterior,	\$208.62	\$40.89	\$145.70	\$78.90	\$118.54	\$0.52	N.A.	N.A.	\$136.93	\$36.57	\$142.45	N.A.
CPT CODE		Control nasal hemorrhage, anterior,	\$178.06		\$145.70	\$78.90	\$118.54	\$0.52	N.A.	IV.A.	9130.33	730.57	V1-25	141741
APG#	86	SIMPLE LIP, MOUTH & SALIVARY G						\$19.20	\$130.12	N.A.	\$112.57	\$13.38	\$132.37	\$69.28
CPT CODE		Excision of lesion of tongue without		\$46.24	\$137.40	\$49.39	\$115.91			N.A.	\$115.03	\$9,47	\$130.49	\$56.81
CPT CODE	41112	Excision of lesion of tongue with clo		\$60.16	\$127.83	\$58.02	\$115.91	\$19.20	N.A.	N.A.	\$115.03	93.47	¥130.43	750.01
APG#	87	COMPLEX LIP, MOUTH, & SALIVARY			S						1100.00	\$2.46	\$140.25	\$73.26
CPT CODE		Vermilionectomy (lip shave), mucosa		\$54.49	\$142.99	\$31.15	\$118.26	N.A.	N.A.	N.A.	\$135.15	\$2.46	\$140.25	\$116.96
CPT CODE	42410	Excision of parotid tumor or parotid	\$250.09	\$86.62	\$250.02	\$80.74	N.A.	N.A.	\$224.67	N.A.	\$153.88	\$20.65	\$197.34	\$110.90
APG#	88	MISCELLANEOUS SINUS, TRACHEA			ES						1			110.00
CPT CODE		Sinusotomy, maxillary (antrotomy); r		\$88.13	\$229.34	\$80.27	\$157.32	\$9.19	\$163.15	N.A.	\$181.39	\$24.49	\$236.23	
CPT CODE	31200	Ethmoidectomy intranasal, anterior	\$228.78	\$87.09	\$192.41	\$63.46	\$226.11	N.A.	\$186.67	N.A.	\$180.24	\$33.94	\$207.43	\$45.35
APG#	105	EXERCISE TOLERANCE TESTS					1						1	
CPT CODE	93015	Cardiovascular stress test using max	\$33.36	\$11.72	\$31.03	\$11.36	\$28.95	\$9.73	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	93017	Cardiovascular stress test using max	\$26.88	N.A.	\$24.36	\$1.92	\$16.95	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	106	ECHOCARDIOGRAPHY			1				1					
CPT CODE		Echocardiography, real-time with im	\$24.35	\$0.37	\$33.35	\$17.89	\$27.89	\$17.33	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Doppler echocardiography, pulsed w		\$5.44	\$17.46	\$6.41	\$13.92	\$8.54	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	108	CARDIAC ELECTROPHYSIOLOGIC TI												
CPT CODE		Cardioversion, elective, electrical co		N.A.	N.A.	N.A.	\$159.70	\$203.72	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Induction of arrhythmia by electrical		N.A.	N.A.	N.A.	\$548.06	\$520.62	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	109	VASCULAR CANNULATION WITH N		ATHETER	1									
CPT CODE		Placement of central venous cathete		\$80.34	\$76.22	\$31,20	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	\$100.14	\$48.77
CPT CODE		Cannula declotting without balloon c		N.A.	\$116.99	\$29,40	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	110	DIAGNOSTIC CARDIAC CATHETERIA												
CPT CODE		Combined left heart catheterization,		N.A.	N.A.	N.A.	\$330.98	\$413.53	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
		Combined right and left heart cathet		N.A.	N.A.	N.A.	\$341.62		N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		ANGIOPLASTY & TRANSCATHETER			14.74	14.74				1	T	1	1	1
APG#	111	Percutaneous transluminal angioplas	N.A.	N.A.	N.A.	N.A.	\$118.69	\$58.13	N.A.	N.A.	N.A.	N.A.	N.A.i	N.A.
CPT CODE		Percutaneous transluminal angiopias	\$399.92	N.A.	\$638.87	N.A.	\$530.82	\$419.08	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		rercutaneous transiuminal coronary	V333.52	IN.Ph.	1 4030.07	1 19.00	1 7000.02	2710.00	14.730	140.0	140.0		1	+

	MEAN	AND STANDARD DEVIATION	FOR DI	RECT LAB	OR COS	TS BY FA	CILITY T			- SURGI	CAL PRO	CEDURES	S	
								Direct Lal	oor Costs					
					Hos	pitals						.C.s		
			Vo	lume	Vo	ume	Vol	lume		ume		ume		ume
			(1000	)-2999)	(3000	-5999)	(60)	00+)	(1000	-2999)	(3000	-5999)	(600	00+)
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	45330	Sigmoidoscopy, flexible fiberoptic di	\$71.86	\$46.56	\$53.57	\$16.68	\$53.82	\$3.99	\$61.13	\$41.37	\$96.70	\$21.75	\$66.10	\$33.95
CPT CODE		Anoscopy for removal of polyp	\$79.78	\$61.62	\$58.29	\$34.30	\$82.04	N.A.	N.A.	N.A.	\$115.10	\$38.49	\$74.43	\$12.42
APG#	161	PROCTOSIGMOIDOSCOPY WITH EX	CISION OR	BIOPSY				1						
CPT CODE		Sigmoidoscopy, flexible fiberoptic fo		\$38.17	\$42.93	\$10.90	\$38.09	\$16.08	\$84.91	\$40.58	\$91.07	\$31.16	\$71.10	\$30.48
CPT CODE		Sigmoidoscopy, flexible fiberoptic fo		\$38.12	\$49.16	\$21.52	\$38.09	\$16.08	\$136.17	N.A.	\$98.72	\$29.94	\$84.60	\$26.06
APG#	162	DIAGNOSTIC UPPER GASTROINTEST	INAL END	OSCOPY										
CPT CODE		Upper GI endoscopy including esoph		\$21.25	\$83.79	\$19.58	\$55.03	\$21.88	\$57.61	\$21.97	\$114.70	\$27.13	\$94.82	\$59.05
CPT CODE		Upper GI endoscopy incl. esophagus	\$80.08	\$23.32	\$96.75	\$34.68	\$56.89	\$24.52	\$54.55	\$15.66	\$127.74	\$39.55	\$87.34	\$34.76
APG#	163	THERAPEUTIC UPPER GASTROINTES												
CPT CODE		Upper GI endoscopy including esoph		\$26.85	\$83.45	\$22.83	N.A.	N.A.	\$59.90	N.A.	\$162.29	N.A.	\$90.84	\$29.55
CPT CODE		Upper GI endoscopy including esoph		\$27.48	\$99.22	\$36.84	N.A.	N.A.	N.A.	N.A.	\$138.91	N.A.	\$96.50	\$25.69
APG#	164	DIAGNOSTIC LOWER GASTROINTES	TINAL EN	DOSCOPY										
CPT CODE		Colonoscopy, fiberoptic, beyond spl	\$97.31	\$25.43	\$93.33	\$13.51	\$65.73	\$13.09	\$68.90	\$14.99	\$107.66	\$23.01	\$97.58	\$56.98
CPT CODE			\$100.88	\$34.36	\$98.21	\$15.89	\$73.68	\$9.04	\$81.55	\$32.30	\$131.74	\$17.31	\$96.17	\$51.66
APG#	165	THERAPEUTIC LOWER GASTROINTE								1				
CPT CODE		Colonoscopy, fiberoptic, beyond spl		\$29.83	\$100.74	\$29.21	\$112.07	\$18.99	\$92.75	\$21.52	\$107.50	N.A.	\$95.46	\$50.53
CPT CODE		Colonoscopy, fiberoptic, beyond spl	\$98.64	\$35.16	\$96.21	\$20.42	\$68.50	\$8.30	\$76.26	\$19.85	\$131.71	\$20.60	\$94.81	\$56.98
APG#	166	ERCP & OTHER MISC. GASTROINTE		DOSCOPY I	PROCEDUR	ES								
CPT CODE		Endoscopic retrograde cholangiopan-		\$63.99	\$182.68	\$73.71	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Small intestinal endoscopy beyond s		\$36.85	\$74.63	\$19.06	\$91.32	N.A.	N.A.	N.A.	\$127.56	N.A.	\$78.33	\$41.94
APG#	167	TONSIL & ADENOID PROCEDURES			-					1				
CPT CODE	42821		\$192.99	\$64.54	\$160.79	\$53.78	\$133.78	\$32.36	\$162.32	\$56.78	\$168.72	\$53.78	\$176.11	\$50.75
CPT CODE		Tonsillectomy, primary or secondary		\$69.98	\$165.58	\$53.18	\$134.11	\$4.11	\$174.91	\$55.90	\$160.11	\$55.56	\$180.14	\$48.44
APG#	168	HERNIA & HYDROCELE PROCEDURE												
CPT CODE		Repair inquinal hernia, age 5 or over		\$59.53	\$142.88	\$52.60	\$136.77	\$48.36	\$132.42	\$42.89	\$177.16	\$33.63	\$136.98	\$23.62
CPT CODE		Repair inguinal hernia, any age recur		\$51.32	\$173.07	\$46.99	\$157.61	\$30.89	\$168.59	\$30.93	\$181.60	\$35.57	\$143.54	\$41.72
APG#	169	SIMPLE HEMORRHOID PROCEDURES												
CPT CODE		Excision of external hemorrhoid tags		\$81.10	\$145,21	\$39.60	\$141.92	\$12.58	\$130.38	\$46.36	\$124.35	\$58.54	\$149.72	\$26.23
CPT CODE		Description of Hemorrhoids, any met		\$90.75	\$196.59	\$158.08	\$141.92	\$12.58	\$163.17	N.A.	\$144.08	\$47.05	\$152.61	\$57.10
APG#	170	SIMPLE ANAL & RECTAL PROCEDUR	RES EXCER	T HEMORRI	HOID PROC	EDURES								
CPT CODE		Removal of fecal impaction or foreig		\$61.54	\$90.60	\$30.86	N.A.	N.A.	N.A.	N.A.	\$133.41	N.A.	\$78.87	N.A.
CPT CODE		Fissurectomy, with or without sphin		\$27.01	\$146.87	\$49.19	\$138.41	\$17.55	\$149.06	N.A.	\$137.52	\$48.77	\$147.51	\$19.57
APG#	171	COMPLEX ANAL & RECTAL PROCED											1	
CPT CODE		Excision of Rectal tumor, transanal a		\$56,55	\$183.94	\$49.18	\$74.75	N.A.	\$163.81	\$30.71	\$170.80	\$3.26	\$172.38	\$78.63
CPT CODE		Hemorrhoidectomy internal and exte		\$37.87	\$189.65	\$72.59	\$161.62	\$35.25	\$132.37	\$28.36	\$133.78	\$40.58	\$141.20	\$30.17
APG#	172	PERITONEAL PROCEDURES & CHAN	GE OF INT									1		
CPT CODE		Change of Gastrostomy Tube	\$86.70	\$43.20	\$68.68	\$42.51	\$14,61	\$2.72	N.A.	N.A.	\$73.47	N.A.	\$53.86	\$11.32
CPT CODE		Peritoneocentesis, abdominal parace		\$34.12	\$103.41	\$125.20	\$88.99	\$42.17	N.A.	N.A.	N.A.	N.A.	\$106.32	N.A.
APG#	173	MISC. DIGESTIVE PROCEDURES	700.04		1									
CPT CODE		Percutaneous placement of gastrost	\$93.34	\$40.31	\$105.16	\$28.17	N.A.	N.A.	\$72.46	N.A.	\$115.87	N.A.	\$98.12	N.A.
CPT CODE		Insertion of intraperitoneal cannula o		\$45.53	\$137.03	\$55.97	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	183	SIMPLE URINARY STUDIES & PROCI												
CPT CODE		Bladder instillation of anticarcinogeni		\$3.78	\$41.95	\$12.51	\$38.63	\$28.21	N.A.	N.A.	\$199.99	N.A.	N.A.	N.A.
CPT CODE		Simple cystometrogram (CMG) (e.g.,	\$33.08	N.A.	\$81.15	\$19.14	\$49.56	\$36.54	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Simple uroflowmetry (UFR) (e.g., sto		N.A.	\$29.06	\$12.25	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	51/36	Simple drollowinetry (OFA) (e.g., sto	VJ3.00	13.75.	1 +20.00	1 7.2.20	1	1			-	-		

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	Terezare	AND STANDARD DEVIATION						Direct Lal						
					Hos	pitals					A.5	S.C.s		
			1/0	ume		ume	Vo	lume	Vol	ume	Vo	lume	Vol	ume
				-2999)		-5999)		00+)		-2999)	(3000	)-5999)	(600	00+)
	_		(1000	Standard	(3000	Standard	100	Standard	11.55.5	Standard		Standard		Standar
SURGICAL			Maria	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
PROCEDURES		APG AND CPT DESCRIPTION	Mean		Micail	Deviation	Wiedii	DOTIGUION	1110011	-			-	
APG#	184	RENAL EXTRACORPOREAL SHOCK V	VAVE LITE	TRIPST	\$172.88	N.A.	N.A.	N.A.	N.A.	N.A.	\$215.46	\$117.56	N.A.	N.A.
CPT CODE		Lithotripsy, extracorporeal shock wa		\$69.28	\$172.88	N.A.	IN.A.	IV.A.	IV.A.	14.75.	4210.40	********	740.0	
APG#	185	URINARY CATHETERIZATION & DILA			1100.00	\$26.81	\$37,37	N.A.	N.A.	N.A.	\$201.17	N.A.	N.A.	N.A.
CPT CODE	51010	Aspiration of bladder; by trocar or in	\$179.69	\$65.40	\$120.06	\$65.99	\$85.16	N.A.	N.A.	N.A.	\$118.91	\$2.20	\$96.42	N.A.
CPT CODE		Dilation of female urethra including s		\$42.37	\$126.95				N.A.	N.A.	\$15.36	N.A.	\$5.81	N.A.
CPT CODE		Catheterization, urethra simple	\$17.38	\$16.95	\$9.21	\$5.05	\$9.08	N.A.	N.A.	· N.A.	910.30	14.0.	V 0.01	1417.0
APG#	186	HEMODIALYSIS								N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	90935	Hemodialysis procedure with single	N.A.	N.A.	\$442.00	N.A.	\$136.50	\$62.81	N.A.			N.A.	N.A.	N.A
CPT CODE	90937	Hemodialysis procedure requiring rep	N.A.	N.A.	N.A.	N.A.	\$180.91	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	IN.A
APG#		PERITONEAL DIALYSIS									1		N. A.	N.A
CPT CODE	90945	Dialysis procedure other than hemod	N.A.	N.A.	N.A.	N.A.	\$152.68	\$205.57	N.A.	N.A.	N.A.	N.A.	N.A.	
CPT CODE		Dialysis procedure other than hemod	N.A.	N.A.	N.A.	N.A.	\$370.00	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A
APG#	188	SIMPLE CYSTOURETHROSCOPY												
CPT CODE		Cystourethroscopy (separate proced	\$138.85	\$74.13	\$125.00	\$35.87	\$109.60	\$48.17	\$127.98	N.A.	\$107.39	\$40.93	\$112.44	\$21.
CPT CODE	52281	Cystourethroscopy, with calibration	\$189.08	\$91.01	\$150.56	\$49.30	\$137.84	\$63.14	N.A.	N.A:	\$110.24	\$41.33	\$137.00	\$22.3
APG#	189	COMPLEX CYSTOURETHROSCOPY	LITHOLA	PAXY										
CPT CODE		Cystourethroscopy, w/ fulguration or		\$63.65	\$139.41	\$24.97	\$106.30	\$67.49	\$126.77	N.A.	\$108.51	\$49.70	\$122.42	N.A
CPT CODE	52224	Cystourethroscopy, w/fulguration an	\$194.22	\$69.26	\$153.62	\$46.30	\$161.85	\$65.77	\$118.15	\$37.07	\$120.58	\$47.87	\$125.48	N.A
APG#	190	PERCUTANEOUS RENAL ENDOSCOP	Y CATHE	TERIZATION	& URETER	RAL END								1
		Introduction of intracatheter or cath		\$119.55	\$204.51	N.A.	\$62,29	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A
CPT CODE	50392	Introduction of ureteral catheter or s	\$236.28	\$116.03	\$153.81	\$44.53	\$112.12	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A
CPT CODE		Ureteral endoscopy through establis		\$17.91	\$152.14	\$21.75	\$209.56	N.A.	N.A.	N.A.	\$164.28	N.A.	N.A.	N.A
CPT CODE			7207.40	917.01	V102.14	721170	1200.00							
APG#	191	CYSTOTOMY	+206 26	\$107.83	\$132.32	N.A.	\$62.29	N.A.	N.A.	N.A.	\$168.66	N.A.	N.A.	N.A
CPT CODE		Cystotomy or cystostomy; with fulg	\$85.94	\$24,44	\$110.71	\$24.35	\$115.14	N.A.	N.A.	N.A.	\$156.24	\$46.73	N.A.	N.A
CPT CODE	51040	Cystostomy; cystotomy with draina		\$30.06	\$136.79	\$25.52	\$115.14	N.A.	N.A.	N.A.	\$147.25		N.A.	N.A
CPT CODE		Cystostomy w/insertion of ureteral c	\$97.31	\$30.06	\$130.79	925.52	3110.14	14.00	14.7.	140741	*********	11111111		
APG#	192	SIMPLE URETHRAL PROCEDURES		101.05	\$137.95	\$56.94	\$122.62	N.A.	\$109.18	N.A.	\$105.41	\$57.00	N.A.	N.
CPT CODE		Biopsy of urethra	\$184.53	\$71.25			\$113.54	N.A.	\$109.18	N.A.	\$124.65		N.A.	N.
CPT CODE	53265	Excision or fulguration; urethral, car	\$183.45	\$55.58	\$143.62	\$44.55	\$113.54	N.A.	\$109.16	IN.A.	\$124.00	774.20	14.74.	14.7
APG#	193	COMPLEX URETHRAL PROCEDURES					1	-			4454.70	\$16.79	N.A.	N.
CPT CODE	53220	Excision or fulguration of carcinoma	\$167.24	\$56.90	\$134.74	\$20.81	\$113.54		N.A.	N.A.	\$154.79		N.A.	N.
CPT CODE	53235	Excision of urethral diverticulum (se		\$41.94	\$135.39	\$27.53	\$138.46	N.A.	N.A.	N.A.	\$166.66	N.A.	N.A.	14.7
APG#	209	TESTICULAR EPIDIDYMAL PROCEDU	JRES									100.00	11111111	110
CPT CODE	54520	Orchiectomy, simple, w/ or w/o testi	\$184.57	\$94.92	\$165.81	\$69.83	\$170.85		\$145.41	\$57.61	\$127.15		\$157.32	
CPT CODE	54521	Orchiectomy, simple w/ or w/o testi	\$201.07	\$82.70	\$192.46	\$95.11	\$170.85	\$43.42	N.A.	N.A.	\$157.30	\$12.72	\$166.28	\$39
APG#	210	INSERTION OF PENILE PROSTHESIS									1		-	-
CPT CODE		Insertion of penile prosthesis; non-in	\$277.87	\$110.98	\$170.88	\$50.49	\$302.10		N.A.	N.A.	\$176.63		N.A.	N.,
CPT CODE	54405	Insertion of inflatable (multi-compon	\$244.05	\$107.74	\$186.67	\$68.36	\$227.35	N.A.	N.A.	N.A.	\$225.36	\$62.77	N.A.	N.
APG#	211	COMPLEX PENILE PROCEDURES												
CPT CODE	54402	Removal or replacement of non-infla	\$211,13	\$86.22	\$200.81	\$48.35	\$140.15	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.
	E4402	Removal, repair or replacement of in	\$177.29	\$71.38	\$206.72	\$40.00	\$140.15	N.A.	N.A.	N.A.	\$181.95	\$22.13	N.A.	N.
CPT CODE	212	SIMPLE PENILE PROCEDURES	77.20	1.1100	1	1								
APG#		Circumcision, clamp procedure exce	\$124.75	\$39.49	\$196.65	\$25.67	\$138.46	N.A.	\$97.72	\$10.39	\$139.94	\$22.40	\$101.38	N.
CPT CODE	54152	Circumcision, clamp procedure exce	6147 19	\$43.79	\$143.40	\$64.08	\$124.18		\$112.40	\$16.29	\$125.67	\$42.58	\$118.41	\$10.
CPT CODE	54161	PROSTATE NEEDLE & PUNCH BIOPS	V 147.13	743.73	7.33.40	107.00	1	1.010		-				

APG AND CPT DESCRIPTION  Biopy, prostate needle or punch sin  Biopy, prostate needle or punch sin  Biopy, prostate incisional, any appl  TRANSURETHRAL RESECTION OF PROCEDURES FOR PREGNANCY & N.  Fetal non-stress test  Dinitiation and/or supervision of intern  PROCEDURES FOR PREGNANCY & N.  Treatment of missed abortion, any tr  THERAPEUT (ABORTION)  Legal (therapeutic) abortion, by dilatification of pincent of punch size of the procedure of the	Vol (1000 Mean \$95.07 \$146.08 305TATE & \$192.83 \$246.43 IEONATAL N.A. N.A. IEONATAL \$139.99 \$139.11	vume -2999) Standard Deviation \$40.77 \$39.93 OTHER PF \$77.52 \$80.04 CARE N.A. N.A.	Hosp (3000 Mean \$91.25 \$136.55	pitals ume -5999) Standard Deviation \$25.54 \$52.14	Vol	Direct Lal ume D0+) Standard Deviation \$13.69 N.A. \$44.88 \$11.23	Volt (1000- Mean \$55.20 \$95.08 \$188.95 N.A.	ıme	A.S Volu (3000- Mean \$95.60 \$122.10 \$133.34 \$252.35	.C.s ume	Volu (600 Mean \$76.78 \$140.56 \$133.54 N.A.	
Signsy, prostate needie or punch sin Signsy, prostate needie or punch sin Signsy, prostate incisional, any appr TRANSURETHAR, RESECTION OF PR Transurethral resection of bladder ne Transurethral resection or prostate, 1 PROCEDURES FOR PREGNANCY & N Fetal non-stress test initiation and/or supervision of intern PROCEDURES FOR PREGNANCY & N Treatment of spontaneous abortion, any IT THERAPUTIC ABORTION Usagl (therapeutic) abortion, by dilat (Legal (therapeutic) abortion)	(1000 Mean \$96.07 \$146.08 ROSTATE & \$192.83 \$246.43 #EONATAL N.A. N.A. #EONATAL \$139.99 \$139.11	-2999) Standard Deviation \$40.77 \$39.93 COTHER PF \$77.52 \$80.04 CARE N.A. N.A. CARE \$57.28	Vol (3000 Mean \$91.25 \$136.55 OSTATE PI \$151.04 \$176.97 \$28.83 \$49.58	vime 1-5999) Standard Deviation \$25.54 \$52.14 ROCEDURE \$32.13 \$50.17	(600 Mean \$91.23 \$111.23 \$101.29 \$125.09 N.A.	Standard Deviation \$13.69 N.A. \$44.88 \$11.23	(1000- Mean \$55.20 \$95.08 \$188.95 N.A.	2999) Standard Deviation N.A. N.A.	Volume (3000) Mean \$95.60 \$122.10 \$133.34 \$252.35	standard Deviation \$64.99 \$63.07	Mean \$76.78 \$140.56 \$133.54	Standard Deviation \$31.41 N.A.
Signsy, prostate needie or punch sin Signsy, prostate needie or punch sin Signsy, prostate incisional, any appr TRANSURETHAR, RESECTION OF PR Transurethral resection of bladder ne Transurethral resection or prostate, 1 PROCEDURES FOR PREGNANCY & N Fetal non-stress test initiation and/or supervision of intern PROCEDURES FOR PREGNANCY & N Treatment of spontaneous abortion, any IT THERAPUTIC ABORTION Usagl (therapeutic) abortion, by dilat (Legal (therapeutic) abortion)	(1000 Mean \$96.07 \$146.08 ROSTATE & \$192.83 \$246.43 #EONATAL N.A. N.A. #EONATAL \$139.99 \$139.11	-2999) Standard Deviation \$40.77 \$39.93 COTHER PF \$77.52 \$80.04 CARE N.A. N.A. CARE \$57.28	(3000 Mean \$91.25 \$136.55 COSTATE PI \$151.04 \$176.97 \$28.83 \$49.58	-5999) Standard Deviation \$25.54 \$52.14 ROCEDURE \$32.13 \$50.17	(600 Mean \$91.23 \$111.23 \$101.29 \$125.09 N.A.	Standard Deviation \$13.69 N.A. \$44.88 \$11.23	(1000- Mean \$55.20 \$95.08 \$188.95 N.A.	2999) Standard Deviation N.A. N.A.	(3000- Mean \$95.60 \$122.10 \$133.34 \$252.35	5999) Standard Deviation \$64.99 \$63.07	Mean \$76.78 \$140.56 \$133.54	Standard Deviation \$31.41 N.A.
Signsy, prostate needie or punch sin Signsy, prostate needie or punch sin Signsy, prostate incisional, any appr TRANSURETHAR, RESECTION OF PR Transurethral resection of bladder ne Transurethral resection or prostate, 1 PROCEDURES FOR PREGNANCY & N Fetal non-stress test initiation and/or supervision of intern PROCEDURES FOR PREGNANCY & N Treatment of spontaneous abortion, any IT THERAPUTIC ABORTION Usagl (therapeutic) abortion, by dilat (Legal (therapeutic) abortion)	Mean \$96.07 \$146.08 ROSTATE & \$192.83 \$246.43 EONATAL N.A. N.A. REONATAL \$139.99 \$139.11	Standard Deviation \$40.77 \$39.93 OTHER PF \$77.52 \$80.04 CARE N.A. N.A. CARE \$57.28	Mean \$91.25 \$136.55 ROSTATE PI \$151.04 \$176.97 \$28.83 \$49.58	Standard Deviation \$25.54 \$52.14 ROCEDURE \$32.13 \$50.17	Mean \$91.23 \$111.23 \$101.29 \$125.09	\$13.69 N.A. \$44.88 \$11.23	Mean \$55.20 \$95.08 \$188.95 N.A.	Standard Deviation N.A. N.A. N.A.	Mean \$95.60 \$122.10 \$133.34 \$252.35	Standard Deviation \$64.99 \$63.07	Mean \$76.78 \$140.56 \$133.54	Standard Deviation \$31.41 N.A.
Signsy, prostate needie or punch sin Signsy, prostate needie or punch sin Signsy, prostate incisional, any appr TRANSURETHAR, RESECTION OF PR Transurethral resection of bladder ne Transurethral resection or prostate, 1 PROCEDURES FOR PREGNANCY & N Fetal non-stress test initiation and/or supervision of intern PROCEDURES FOR PREGNANCY & N Treatment of spontaneous abortion, any IT THERAPUTIC ABORTION Usagl (therapeutic) abortion, by dilat (Legal (therapeutic) abortion)	Mean \$96.07 \$146.08 ROSTATE & \$192.83 \$246.43 EONATAL N.A. N.A. REONATAL \$139.99 \$139.11	Standard Deviation \$40.77 \$39.93 OTHER PF \$77.52 \$80.04 CARE N.A. N.A. CARE \$57.28	\$91.25 \$136.55 OSTATE PI \$151.04 \$176.97 \$28.83 \$49.58	Deviation \$25.54 \$52.14 ROCEDURE \$32.13 \$50.17	\$91.23 \$111.23 \$101.29 \$125.09 	\$13.69 N.A. \$44.88 \$11.23	\$55.20 \$95.08 \$188.95 N.A.	N.A. N.A. N.A. N.A.	\$95.60 \$122.10 \$133.34 \$252.35	Deviation \$64.99 \$63.07 \$79.16	\$76.78 \$140.56 \$133.54	\$31.41 N.A.
Signsy, prostate needie or punch sin Signsy, prostate needie or punch sin Signsy, prostate incisional, any appr TRANSURETHAR, RESECTION OF PR Transurethral resection of bladder ne Transurethral resection or prostate, 1 PROCEDURES FOR PREGNANCY & N Fetal non-stress test initiation and/or supervision of intern PROCEDURES FOR PREGNANCY & N Treatment of spontaneous abortion, any IT THERAPUTIC ABORTION Usagl (therapeutic) abortion, by dilat (Legal (therapeutic) abortion)	\$96.07 \$146.08 ROSTATE 8 \$192.83 \$246.43 JEONATAL N.A. N.A. JEONATAL \$139.99 \$139.11	Deviation \$40.77 \$39.93 OTHER PF \$77.52 \$80.04 CARE N.A. N.A. CARE \$57.28	\$91.25 \$136.55 OSTATE PI \$151.04 \$176.97 \$28.83 \$49.58	\$25.54 \$52.14 ROCEDURE \$32.13 \$50.17	\$91.23 \$111.23 \$101.29 \$125.09 	\$13.69 N.A. \$44.88 \$11.23	\$55.20 \$95.08 \$188.95 N.A.	N.A. N.A. N.A.	\$95.60 \$122.10 \$133.34 \$252.35	\$64.99 \$63.07 \$79.16	\$76.78 \$140.56 \$133.54	\$31.41 N.A.
Signsy, prostate needie or punch sin Signsy, prostate needie or punch sin Signsy, prostate incisional, any appr TRANSURETHAR, RESECTION OF PR Transurethral resection of bladder ne Transurethral resection or prostate, 1 PROCEDURES FOR PREGNANCY & N Fetal non-stress test initiation and/or supervision of intern PROCEDURES FOR PREGNANCY & N Treatment of spontaneous abortion, any IT THERAPUTIC ABORTION Usagl (therapeutic) abortion, by dilat (Legal (therapeutic) abortion)	\$96.07 \$146.08 ROSTATE 8 \$192.83 \$246.43 JEONATAL N.A. N.A. JEONATAL \$139.99 \$139.11	\$40.77 \$39.93 COTHER PF \$77.52 \$80.04 CARE N.A. N.A. CARE \$57.28	\$136.55 COSTATE PI \$151.04 \$176.97 \$28.83 \$49.58	\$52.14 ROCEDURE \$32.13 \$50.17	\$111.23 \$101.29 \$125.09	N.A. \$44.88 \$11.23	\$95.08 \$188.95 N.A.	N.A. N.A.	\$122.10 \$133.34 \$252.35	\$63.07 \$79.16	\$140.56 \$133.54	N.A.
5 Blops, prostate incisional, any appr TRANSURETHAR RESECTION OF PT TRANSURETHAR RESECTION OF DESIGNATORY & N. 5 FERTI AND STATEMENT OF THE TRANSULT OF TH	\$146.08 ROSTATE 8 \$192.83 \$246.43 JEONATAL N.A. N.A. JEONATAL \$139.99 \$139.11	\$77.52 \$80.04 CARE N.A. N.A. CARE \$57.28	\$151.04 \$176.97 \$28.83 \$49.58	\$32.13 \$50.17 N.A.	\$101.29 \$125.09 	\$44.88 \$11.23 N.A.	\$188.95 N.A.	N.A. N.A.	\$133.34 \$252.35	\$79.16	\$133.54	N.A.
TRANSURETHRAL RESECTION OF P Transurethral resection of bladder nel 1 Transurethral resection or prostate, i. PROCEDURES FOR PREGNANCY & N. 5 Fetal non-stress tast 1 Initiation and/or supervision of Intern PROCEDURES FOR PREGNANCY & N. 1 Treatment of insised abortion, any tr THERAPEUTIC ABORTION, 1 Legal (therapeutic) abortion, by dilat 1 Legal (therapeutic) abortion, by dilat	\$192.83 \$246.43 \$246.43 \$EONATAL N.A. N.A. \$139.99 \$139.11	\$77.52 \$80.04 CARE N.A. N.A. CARE \$57.28	\$151.04 \$176.97 \$28.83 \$49.58	\$32.13 \$50.17 N.A.	\$125.09 N.A.	\$11.23 N.A.	N.A.	N.A.	\$252.35			
Transcribtal resection of bladder no Transcribtal resection or grostate, i PROCEDURES FOR PREGNANCY & N. 5 Fetal non-stress test 10. Initiation and/or supervision of intern PROCEDURES FOR PREGNANCY & N. 11 Treatment of spontaneous abortion, 11 Treatment of insied abortion, any to THERREUTIC ABORTION 0. Legal (therapeutic) abortion, by dilat 11. Legal (therapeutic) abortion and the transcribed (therapeutic) abortion and transcribed (therapeut	\$192.83 \$246.43 IEONATAL N.A. N.A. IEONATAL \$139.99 \$139.11	\$77.52 \$80.04 CARE N.A. N.A. CARE \$57.28	\$151.04 \$176.97 \$28.83 \$49.58	\$32.13 \$50.17 N.A.	\$125.09 N.A.	\$11.23 N.A.	N.A.	N.A.	\$252.35			
I Transurethral resection or prostate, i. PROCEDURES FOR PREMANUES.  Fetal non-stress test  initiation and/or supervision of intern PROCEDURES FOR PREGNANCY & N Treatment of reportaneous abortion, Treatment of insised abortion, any tr THERAPEUTIC ABORTION Legal (threapeutic) abortion, by dilat  Legal (threapeutic) abortion,	\$246.43 EONATAL N.A. N.A. 8139.99 \$139.11	\$80.04 CARE N.A. N.A. CARE \$57.28	\$176.97 \$28.83 \$49.58	N.A.	N.A.	N.A.				N.A.	N.A.	N.A.
PROCEDURES FOR PREGNANCY & N 5 Fetal non-stress test Initiation and/or supervision of Intern PROCEDURES FOR PREGNANCY & N 1 Treatment of spontaneous abortion, on the supervision of Internation l Internation of International Internation of International International International International International International Internation of International	N.A. N.A. N.A. IEONATAL \$139.99 \$139.11	N.A. N.A. CARE \$57.28	\$49.58				N.A.	NΑ				
5 Fetal non-stress test philipide procession of Intern PROCEDURES FOR PREGNANCY 8. N PROCEDURES FOR PREGNANCY 8. N Treatment of spontaneous abortion, Treatment of missed abortion, any tr THERAPEUTIC ABORTION Legal (therapeutic) abortion, by dilat I Legal (therapeutic) abortion, by dilat FEMALE SERVITAL ENDOSCOPY	N.A. N.A. EONATAL \$139.99 \$139.11 \$125.96	N.A. N.A. CARE \$57.28	\$49.58				N.A.	NΔ				
D Initiation and/or supervision of Intern PROCEDURES FOR PREGNANCY & N 1 Treatment of spontaneous abortion, 2 Treatment of missed abortion, any tr THERAPEUTIC ABORTION D Legal (therapeutic) abortion, by dilat 1 Legal (therapeutic) abortion, by dilat FEMALE GENTIAL ENDOSCOPY	N.A. EONATAL \$139.99 \$139.11 \$125.96	N.A. CARE \$57.28	\$49.58		N.A.				N.A.	N.A.	N.A.	N.A.
PROCEDURES FOR PREGNANCY & N 1 Treatment of spontaneous abortion, 2 Treatment of missed abortion, any tr THERAPEUTIC ABORTION D Legal (therapeutic) abortion, by dilati FEMALE GENITAL ENDOSCOPY	\$139.99 \$139.11 \$125.96	\$57.28				N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
1 Treatment of spontaneous abortion, D Treatment of missed abortion, any tr THERAPEUTIC ABORTION D Legal (therapeutic ) abortion, by dilat Legal (therapeutic) abortion, by dilat FEMALE GENITAL ENDOSCOPY	\$139.99 \$139.11 \$125.96	\$57.28	\$85.54									
D Treatment of missed abortion, any tr THERAPEUTIC ABORTION D Legal (therapeutic ) abortion, by dilat I Legal (therapeutic) abortion, by dilati FEMALE GENITAL ENDOSCOPY	\$139.11 \$125.96			\$14.63	\$92.93	\$36.60	\$68.75	\$26.70	\$112.12	\$15.29	\$87.86	\$8.72
THERAPEUTIC ASORTION  D Legal (therapeutic ) abortion, by dilat  Legal (therapeutic) abortion, by dilati  FEMALE GENITAL ENDOSCOPY	\$125.96	100.00	\$125,47	\$35.97	\$100.93	\$47.91	\$80.06	\$28.86	\$105.39	\$39.99	\$89.87	\$16.84
D Legal (therapeutic ) abortion, by dilat 1 Legal (therapeutic) abortion, by dilati FEMALE GENITAL ENDOSCOPY	\$125.96			122121								
1 Legal (therapeutic) abortion, by dilati FEMALE GENITAL ENDOSCOPY	4120.00	\$27.26	\$127,44	\$56.76	\$67.05	N.A.	\$75.56	\$36.36	\$80.93	\$48.58	\$97.93	N.A.
FEMALE GENITAL ENDOSCOPY		\$0.80	\$110.52	\$35.22	\$67.05	N.A.	\$100.66	\$46.97	\$72.76	\$55.04	\$98.74	\$1.15
I aparoscopy for visualization of pely	¥100.00	10.00										
	\$180.62	\$33.19	\$179.37	\$36.55	\$127.61	\$22.47	\$142.96	\$41.55	\$130.71	\$45.60	\$141.37	\$64.51
5 Laparoscopy for visualization of pelv	\$100.02	\$48.18	\$170.38	\$43.28	\$127.61	\$22.47	\$141.16	\$51.45	\$156.39	\$68.93	\$178.99	\$106.16
COLPOSCOPY	V133.33	440110	1110100									
2 Colposcopy (vaginoscopy); (separate	\$138.77	\$20.96	\$116.27	\$34,54	\$125.24	N.A.	\$96.17	\$18.40	\$95.92	\$50.65	\$92.81	\$34.48
4 Colposcopy (vaginoscopy); with biop	\$140.54	\$33.15	\$126.68	\$37.25	\$129.89	\$0.59	\$113.88	N.A.	\$84.19	\$66.77	\$98.62	\$57.10
MISC. FEMALE REPRODUCTIVE PRO	CEDURES	700.10	***************************************	101101								
O Biopsy of vulva (separate procedure)		\$23.82	\$120.54	\$39.84	\$128.05	\$9.57	\$87.82	\$10.27	\$115.10	\$41.31	\$119.13	\$38.05
Biopsy of valva (separate procedure)     Biopsy of cervix, circumferential (co	\$142.30	\$24.86	\$123.45	\$32.92	\$104.55	\$22,45	\$94.01	\$15.82	\$122.03	\$37.83	\$123.27	\$27.32
DILATION & CURETTAGE	V143.00	¥24.00	***************************************									
O Dilation and curettage of cervical stu	4125 OR	\$35.40	\$110.62	\$32.89	\$87.74	\$29,14	N.A.	N.A.	\$96.33	N.A.	\$114.71	\$22.24
O Dilation and curettage of dervicar sto		\$47.92	\$109.62	\$23,68	\$114,45	\$14.54	\$88.33	\$32.72	\$116.23	\$26.19	\$79.08	\$33.18
	VIB	447102	*100101	100:11			1					
FEMALE GENITAL EXCISION & REPA 0 Vulvectomy; partial, unilateral or bila		\$36.81	\$129.58	\$14.50	\$142.15	\$10.38	\$135.92	N.A.	\$122.71	\$64.92	\$139.38	\$40.41
5 Excision of vaginal cyst or tumor	\$166.57	\$23.81	\$136.88	\$33.36	\$123.82	\$8,00	\$90.88	\$32.53	\$118.35	\$49.03	\$138.11	\$33.32
ELECTROENCEPHALOGRAM	V100.07	720.01	7100100	100.00								
	N A	NΑ	\$25.16	\$0.80	\$40.92	\$12.13	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
					\$370.51	\$26,44	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
	¥220.70	11.00	141731	1								
	NΑ	N.A.	N.A.	N.A.	\$24.95	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
				N.A.	\$26.41	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
	14.04											
	NΑ	NΑ	\$3.16	N.A.	\$6.39	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
				N.A.	\$10.66	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
IN IECTION OF SUBSTANCE INTO S												
		\$33.56	\$96.70	\$74.61	\$37.38	\$6.26	\$43.59	\$34.65	\$38.03	\$13.59	\$10.40	\$10.82
9 Injection of anaethetic substance lin	N.A.	N.A.	\$109.13	\$91.41	\$48.23	N.A.	\$50.75	\$14.76	\$70.60	\$22.02	\$2.75	N.A.
		1									!	
9 Injection of substance other than an		N.A.	N.A.	N.A.	\$28.03	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
9 Injection of substance other than an SUBDURAL & SUBARACHNOID TAP		N.A.	\$213.71	N.A.	\$112.12	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
9 Injection of substance other than an SUBDURAL & SUBARACHNOID TAP 5 Replacement or irrigation, ventricular	fi N.A	1				-				1		
0 1	ELECTROCONVULSIVE THERAPY JEIGETCORNULSIVE THERAPY JEIGETCORNULSIVE therapy lincludes Electroconvulsive therapy lincludes NERVE & MUSCLE TESTS Nerve conduction, velocity and/or la Nerve conduction, velocity and/or la NINJECTION OF SUBSTANCE INTO S Injection of anesthetic substance fin SUBSURAL & SUBARACHNOID TAT Replacement or irrigation, ventricula	Polysomnography (recording, analysi §220.70   ELECTROCONVLSIVE THERAPY   ELECTROCONVLSIVE THERAPY	Solvenmography fecording, analysis   \$220.70   N.A.	Bolysomrography   recording, analysis   \$220.70   N.A.   N.A.	Polysomnography (recording, analysis   \$220.70   N.A.   N.A.   N.A.	Section   Polysomrography (recording, analys)   \$22.0.70   N.A.   N.A.   N.A.   \$370.51	Section   Polysomrography (recording, analysis)   \$22.0.70   N.A.   N.A.   N.A.   \$37.0.51   \$26.44			Section Computation   1.0		

	MEAN	AND STANDARD DEVIATION	FOR DI	RECT LA	OR COS	TS BY FA	CILITY T	YPE AND	VOLUMI	- SURG	CAL PRO	CEDUKE	3	
								Direct La	bor Costs					
						pitals						.C.s		
			Vol	ume		ume		lume		ume		ıme		ume
			(1000	-2999)	(3000	-5999)	(60	00+)	(1000	-2999)	(3000	-5999)	(600	00+)
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	64510	Injection, anesthetic agent; stellate	\$132.30	N.A.	\$74.55	\$67.19	N.A.	N.A.	\$34.18	\$16.79	\$51.00	\$23.34	\$6.53	\$5.35
CPT CODE	64520	Injection, anesthetic agent; lumbar o	\$94.28	\$48.01	\$69.96	\$26.90	\$126.10	\$131.73	\$50.06	N.A.	\$36.73	\$19.37	\$6.28	\$4.99
APG#	267	REVISION & REMOVAL OF NEUROLO	GICAL DE	VICE										
CPT CODE		Revision or removal of spinal neurost		N.A.	\$135.91	N.A.	\$136.29	\$34.18	N.A.	N.A.	\$108.19	N.A.	N.A.	N.A.
CPT CODE	63688	Revision or removal of spinal neurost	\$149.29	N.A.	\$135.91	N.A.	\$136.29	\$34.18	N.A.	N.A.	\$107.50	N.A.	N.A.	N.A.
APG#	268	NEUROSTIMULATOR AND VENTRICE	JLAR SHUI	NT IMPLAN	TATION									
CPT CODE		Percutaneous implantation of neuros		N.A.	N.A.	N.A.	\$219.25	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Percutaneous implantation of neuros	N.A.	N.A.	N.A.	N.A.	\$219.25	N.A.	N.A.	N.A.	N.A.	N.A.	\$217.41	N.A.
APG#		CARPAL TUNNEL RELEASE												
CPT CODE		Neuroplasty and/or transposition; me	\$166.43	\$26.43	\$132.18	\$26.32	\$133.69	\$34.88	\$112.01	\$43.58	\$108.01	\$36.00	\$132.34	\$46.88
APG#	270	NERVE REPAIR & DESTRUCTION									-			107.5
CPT CODE	64718	Neuroplasty and/or transposition uln	\$196.91	\$56.06	\$168.51	\$60.91	\$170.38	\$17.59	\$142.45	\$89.57	\$146.70	\$25.93	\$207.02	\$27.01
CPT CODE	64719	Neuroplasty and/or transposition; uln	\$193.91	\$72.78	\$169.38	\$71.49	\$165.55	\$10.77	\$92.91	\$3.58	\$131.59	\$33.59	\$197.38	\$24.89
APG#	271	COMPLEX NERVE REPAIR												
CPT CODE		Suture of digital nerve, hand or foot;	\$239.63	\$123.89	\$195.90	\$44.26	\$154.38	\$5.03	\$131.47	N.A.	\$141.00	\$47.75	\$212.63	\$29.38
CPT CODE		Suture of one nerve, hand or foot; c		\$17.95	\$203.99	\$43.22	\$154.38	\$5.03	\$145.58	N.A.	\$139.57	\$30.29	\$176.57	\$9.14
APG#	272	SPINAL TAP						1						
CPT CODE		Spinal puncture, lumbar, diagnostic	\$57.28	\$19.64	\$64.08	\$59.19	\$50.32	\$30.14	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	62272	Spinal puncture, therapeutic, for drai	N.A.	N.A.	\$15.83	\$4.29	\$71.63	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	287	MINOR OPTHALMOLOGICAL TESTS	& PROCED	URES										
CPT CODE	92235	Ophthalmoscopy, with medical diag	N.A.	N.A.	N.A.	N.A.	\$6.16	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	289	SIMPLE LASER EYE PROCEDURES					1							
CPT CODE	65855	Trabeculoplasty by laser surgery, on	\$18.55	N.A.	\$132.68	\$29.41	\$97.68	\$46.28	\$22.41	N.A.	\$19.20	N.A.	\$17.42	N.A.
CPT CODE	66821	Discission of secondary membraneo	\$122.09	\$57.40	\$155.56	\$33.03	\$154.55	\$23.94	\$43.50	\$46.56	\$70.88	\$73.09	\$112.23	\$58.16
APG#	290	COMPLEX LASER EYE PROCEDURES						1	1					
CPT CODE	67105	Repair of retinal detachment, one or	N.A.	N.A.	\$114.92	\$109.86	\$149.49	N.A.	\$107.65	N.A.	\$190.46	\$67.27	N.A.	N.A.
CPT CODE	67228	Destruction of extensive or progressi	N.A.	N.A.	\$110.27	\$116.44	\$59.56	\$21.49	\$22.41	N.A.	\$13.22	\$8.45	N.A.	N.A.
APG#	291	CATARACT PROCEDURES												-
CPT CODE	66850	Removal of lens material; phacofrag	\$174.38	\$58.96	\$121.15	\$50.06	\$74.85	\$29.64	\$105.06	\$60.43	\$125.28	\$46.13	\$144.01	N.A.
CPT CODE	66940	Extraction of lens with or without iri	\$178.39	\$103.10	\$108.43	\$43.33	\$63.70	\$34.53	\$86.99	\$44.41	\$100.33	\$51.17	\$115.63	\$22.01
CPT CODE	66983	Intracapsular cataract extraction wit	\$150.89	\$39.03	\$195.15	\$45.21	\$190.05		\$97.34	\$38.06	\$119.60	\$8.42	\$138.58	\$3.34
CPT CODE		Extracapsular cataract removal with	\$145.73	\$39.29	\$199.44	\$48.75	\$170.77	\$80.73	\$97.95	\$40.83	\$121.20	\$38.11	\$127.20	\$55.80
CPT CODE	66985	Insertion of intraocular lens subsequ	\$144.72	\$76.23	\$110.54	\$24.87	\$99.19	\$18.30	\$77.23	\$32.48	\$97.62	\$38.55	\$80.93	\$16.15
APG#	292	SIMPLE ANTERIOR SEGMENT EYE P	ROCEDURE	S FOR GLA	UCOMA		1							
CPT CODE	66500	Iridotomy by stab incision (separate	\$140.02	\$19.65	\$153.86	\$36.08	\$78.13	N.A.	\$125.90	N.A.	\$70.29	\$69.89	\$95.40	N.A.
CPT CODE	66720	Cyclocryotherapy initial	N.A.	N.A.	\$140.95	N.A.	\$127.25	N.A.	\$55.23	\$24.02	\$106.69	\$22.44	N.A.	N.A.
APG#	293	COMPLEX ANTERIOR SEGMENT EYE	PROCEDU		LAUCOMA									
CPT CODE	66150	Fistulization of sclera for glaucoma;	\$108.17	N.A.	\$179.37	N.A.	\$160.53		\$84.98	\$34.23	\$122.56	N.A.	N.A.	N.A.
CPT CODE	66170	Fistulization of sclera for glaucoma t	N.A.	N.A.	\$156.86	\$26.54	\$170.96	\$5.95	\$104.50	\$41.44	\$118.21	\$51.10	N.A.	N.A.
APG#	294	SIMPLE ANTERIOR SEGMENT EYE P	ROCEDUR		FOR GLAU									
CPT CODE	65450	Destruction of lesion of cornea by cr		N.A.	\$62.39	N.A.	\$126.53		\$79.55	N.A.	\$73.22	\$74.03	\$89.73	N.A.
CPT CODE	66820	Discussion or secondary membraneo	\$129.46	\$31.45	\$184.30	\$29.66	\$78.13	N.A.	\$67.95	\$42.29	\$121.13	\$2.02	N.A.	N.A.
APG#	295	MODERATE ANTERIOR SEGMENT E	YE PROCE	URES							1		1	-
CPT CODE	66625	Iridectomy, w/corneoscleral or corne		N.A.	\$135.05	\$62.69	\$166.75		\$80.20	\$41.07	\$75.03	\$48.85	\$104.99	N.A.
CPT CODE		Removal of secondary membraneous		\$19.48	\$158.26	\$25.14	\$78.13	N.A.	\$148.56	N.A.	N.A.	N.A.	N.A.	N.A.

	MEAN	AND STANDARD DEVIATION	FUR DIF	IECT LAD	on cos	ISBITA	OILITT I	Diseas Le	bor Costs					
						1. 1		Direct La	bor Costs		Δς	.C.s		
						pitals	Val	ume	Vol	ume		ume	Volu	ıme
				ume		ume		00 + )		-2999)		-59991	(600	
			(1000		(3000	-5999)	(600		(1000	Standard	(3000	Standard	1000	Standard
SURGICAL	-			Standard		Standard		Standard	Mean	Deviation	Mean	Deviation	Mean	Deviation
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	iviean	Deviation	Widaii	Deviation
APG#		COMPLEX ANTERIOR SEGMENT EYE			T FOR GLA				\$143,91	\$47.50	\$113.88	\$93,14	\$153.71	\$4.72
CPT CODE	65750	Keratoplasty, penetrating, includes a	N.A.	N.A.	\$65.93	N.A.	\$126.53	N.A.		\$55.57	\$99.05	\$62.57	\$132.85	\$16.53
CPT CODE	67010	Removal of vitreous, anterior approa	\$178.38	\$55.19	\$166.47	\$21.14	\$78.13	N.A.	\$91.32	\$55.57	\$99.05	902.57	\$132.00	V10.00
APG#	297	SIMPLE POSTERIOR SEGMENT EYE P	ROCEDUR	ES							N.A.	N.A.	N.A.	N.A.
CPT CODE	67208	Destruction of localized lesion of reti	N.A.	N.A.	\$165.34	\$38.55	\$28.03	N.A.	N.A.	N.A.	\$125.56	N.A.	N.A.	N.A.
CPT CODE	67227	Destruction of extensive or progressi	N.A.	N.A.	\$192.60	N.A.	\$74.75	N.A.	\$27.57	. N.A.	\$125.50	N.A.	IV.A.	14.74
APG#	298	COMPLEX POSTERIOR SEGMENT EY	E PROCEDI	URES							\$169.50	\$102.24	\$213.18	\$115.36
CPT CODE		Vitrectomy, mechanical, pars plana	\$244.09	\$174.91	\$181.18	\$8.66	N.A.	N.A.	\$91.46	\$73.72	\$169.50	N.A.	\$154.23	N.A.
CPT CODE	67101	Repair of retinal detachment, one or	\$335.78	N.A.	\$192.60	N.A.	\$149.49	N.A.	\$107.65	N.A.	\$127.00	N.A.	\$154.25	14.74.
APG#	299	STRASISMUS & MUSCLE EYE PROCI	EDURES								4400.04	\$33.16	\$148,92	\$51.32
CPT CODE	67311	Strabismus surgery on patient not pr	\$187.50	\$69.56	\$217.32	\$62.70	\$154.83	N.A.	\$95.54	\$43.16	\$129.01	\$53.16	\$140.92	\$12.89
CPT CODE	67312	Strabismus surgery on patient not pr	\$145.47	\$43.09	\$193.82	\$20.00	\$154.83	N.A.	\$108.31	\$41.77	\$132.16	\$53.88	\$110.00	912.03
APG#	300	SIMPLE REPAIR & PLASTIC PROCED	URES OF E	YE								\$49.69	\$103.08	\$28.66
CPT CODE	67840	Excision of lesion of eye lid without	\$164.94	\$44.98	\$157.69	\$21.01	\$126.80	N.A.	\$76.00	\$39.75	\$73.30		\$103.08	\$40.78
CPT CODE		Repair of entropion suture	\$154.23	\$52.87	\$159.26	\$30.05	\$126.80	N.A.	\$80.82	\$41.42	\$99.51	\$30.11	\$110.00	940.78
APG#	301	COMPLEX REPAIR & PLASTIC PROC	EDURES O	FEYE		1					1100 07	\$62.33	\$123.68	\$5.64
CPT CODE		Repair of blepharoptosis (tarso)-levat	\$158.00	\$55.00	\$198.61	\$50.24	\$161.75	\$29.85	\$124.21	\$66.58	\$109.07		\$123.68	\$3.84
CPT CODE	68720	Dacryocystorhinostomy (fistulization	\$204.85	\$47.17	\$246.28	\$66.45	\$184.74	\$13.32	\$166.50	\$63.20	\$152.40	\$74.59	\$150.20	\$3.64
APG#	313	OTORHINOLARYNGOLOGIC FUNCTION	ON TESTS										N. A.	N.A.
CPT CODE		Oscillating tracking test, with record		N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	
CPT CODE		Brainstem evoked response recordin		N.A.	\$50.42	N.A.	\$102.58	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	314	MAJOR EXTERNAL EAR PROCEDUR												
CPT CODE	69140	Excision exostosis (es), external audi		\$60.45	\$148.28	\$35.47	\$133.47	\$9.44	\$136.17	N.A.	\$145.87	N.A.	\$194.03	N.A.
CPT CODE	69310	Reconstruction of external auditory	\$121.44	\$56.79	\$237.84	\$99.30	\$126.80	N.A.	N.A.	N.A.	\$191.52	N.A.	\$208.82	N.A.
APG#	315	TYMPANOSTOMY & OTHER SIMPLE	MIDDLE E	AR PROCE	OURES						1			
CPT CODE		Myringotomy including aspiration an		\$40.08	\$99.86	\$24.50	\$109.74	\$24.04	\$72.34	\$25.51	\$100.44	\$34.38	\$85.00	\$13.40
CPT CODE	69433	Tympanostomy (requiring insertion o	\$89.23	\$31.62	\$78.17	N.A.	\$100.65	\$25.68	\$50.76	\$14.53	\$87.53	\$54.05	\$66.26	\$23.80
APG#	316	TYMPANOPLASTY & OTHER COMPL	EX MIDDL	E EAR PRO	CEDURES				1	1				
CPT CODE	69631			\$70.97	\$216.13	\$54.02	\$226.67	\$3.10	\$186.59	\$65.36	\$158.01	\$47.89	\$215.75	\$69.39
CPT CODE	60660	Stapedectomy with re-establishment	\$184.28	\$15.27	\$291.88	\$134.05	\$186.98	\$53.02	N.A.	N.A.	\$249.98	N.A.	\$267.99	\$115.8
APG#	317	INNER EAR PROCEDURES	712								1			
		Endolymphatic sac operation; with s	\$175.25	N.A.	\$128.32	N.A.	\$112.12	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Revision fenestration operation	N.A.	N.A.	N.A.	N.A.	\$112.12	N.A.	N.A.	N.A.	\$36.66	N.A.	N.A.	N.A.
	318	SIMPLE AUDIOMETRY												
APG#		8asic comprehensive audiometry	\$61.85	\$11.96	\$35.64	\$9.57	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Tympanometry	\$7.12	N.A.	\$10.58	\$6.57	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	319	REMOVAL OF IMPACTED CERUMEN												
APG#		Removal impacted cerumen (separat	\$94.66	\$45.62	\$23.97	N.A.	\$100.65	\$25.68	\$85.68	N.A.	\$68.78	\$17.49	\$78.45	\$10.23
CPT CODE	69210	nemoval impacted cerumen (separat	754.00	1.0.02										
		URGICAL PROCEDURES	\$144.82	\$51.83	\$134.45	\$46.97	\$118.99	\$40,46	\$109.66	\$33.48	\$128,45	\$39.68	\$133.16	\$38.59

-	MEAN	AND STANDARD DEVIATION	ON FOR D	IRECT SU	PPLY CC	STS BY F	ACILITY T			E - SURG	ICAL PRO	CEDURE	S	
								Supply C	osts					
						pitals						.C.s		ume
			Vol			ume	Volu			ume		ume		ume 00+)
			(1000-		(3000	-5999)	(600		(1000	-2999)	(3000	-5999)	(600	
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviatio
APG#	2	SUPERFICIAL NEEDLE BIOPSY & A											10.05	
CPT CODE	19000	Puncture Aspiration of Cyst of Br	\$31.12	\$19.11	\$21.62	\$16.08	\$17.41	\$3.80	\$82.63	N.A.	\$25.81	\$26.15	\$8.85	N.A.
CPT CODE	19100	Biopsy of breast, needle (separate)	N.A.	N.A.	\$55.34	\$10.46	\$84.05	N.A.	\$81.77	N.A.	\$57.81	\$55.06	\$48.16	\$57.18
CPT CODE	60100	Biopsy, thyroid, percutaneous nee	N.A.	N.A.	\$55.10	N.A.	\$54.80	N.A.	N.A.	N.A.	N.A.	N.A.	\$103.84	N.A.
APG#	3	SIMPLE INCISION & DRAINAGE						1						
CPT CODE	10000	Incision and drainage of infected	\$70.33	\$8.55	\$54.75	\$11.61	\$69.83	\$13.75	\$116.75	N.A.	\$67.53	\$3.16	\$78.83	\$28.38
CPT CODE	10060	Incision and drainage of abscess (	\$77.66	\$24.52	\$61.29	\$15.63	\$75.54	\$6.26	\$109.17	\$50.06	\$71.99	\$25.04	\$73.96	\$24.44
CPT CODE	10120	Incision & removal of foreign bod	\$85.50	\$18.07	\$64.18	\$11.57	\$55.00	\$12.69	\$90.39	\$25.54	\$71.07	\$18.14	\$86.76	\$19.47
APG#	4	COMPLEX INCISION AND DRAINA	GE											
CPT CODE	10141	Incision and drainage of hematom	\$106.38	\$44.69	\$79.42	\$16.97	\$103.79	N.A.	\$81.51	\$22.53	\$93.78	\$11.79	\$95.80	\$10.88
CPT CODE		Incision and drainage, complex, p	\$96.08	\$24.80	\$81.65	\$22.62	\$73.85	\$22.23	\$110.14	N.A.	\$81.55	\$18.28	\$66.27	N.A.
CPT CODE	23931	Incision and drainage, upper arm	\$102.81	\$17.84	\$84.15	\$25.78	\$76.00	\$23.99	\$122.70	N.A.	\$113.43	\$36.53	\$57.33	N.A.
CPT CODE	28002	Deep dissection below fascia, for	\$99.95	\$61.12	\$89.99	\$22.46	\$94.72	N.A.	N.A.	N.A.	\$91.83	\$26.75	\$29.81	N.A.
APG#	5	COMPLEX INCISION AND DRAINA	GE					1						
CPT CODE	11700	Debridement of nails, manual; fiv	\$42.01	\$14.08	\$36.43	\$20.51	\$52.39	\$14.76	\$84.37	N.A.	\$52.60	\$23.18	\$50.52	\$6.97
CPT CODE		Debridement of nails, manual eac	\$42.86	\$13.18	\$35.16	\$19.43	\$52.01	\$14.22	\$71.62	N.A.	\$51.20	\$21.16	\$63.36	\$35.50
APG#	6	SIMPLE DEBRIDEMENT & DESTRU												
CPT CODE		Debridement of skin, partial thick	\$76.61	\$16.76	\$66.16	\$10.58	\$86.92	N.A.	\$117.15	N.A.	\$72.95	\$10.83	\$73.52	\$16.56
CPT CODE		Avulstion of nail plate, partial or c	\$65.49	\$34.93	\$46.29	\$25.98	\$47.34	\$20.82	\$128.08	N.A.	\$64.27	\$33.10	\$59.73	\$17.65
CPT CODE		Destruction by any method, with	\$57.54	\$2.37	\$75.23	\$28.32	\$58.20	\$15.16	\$82.61	N.A.	\$69.08	\$32.34	\$60.88	\$23.70
CPT CODE		Removal of implant superficial, (e.	\$103.86	\$51.56	\$76.50	\$16,31	\$73.11	\$17.90	\$85.89	\$39.24	\$96.95	\$27.53	\$92.96	\$31.10
APG#	7	SIMPLE EXCISION & BIOPSY												
CPT CODE		Excision, benign lesion, except ski	\$72.65	\$6.99	\$64.21	\$9.04	\$65.93	\$9.97	\$91.58	\$23.43	\$89.89	\$19.79	\$84.30	\$26.36
CPT CODE		Excision, other benign lesion (unle	\$72.07	\$4.84	\$54.73	\$17.09	\$65.40	\$29.38	\$63.84	\$26.34	\$73.23	\$14.36	\$83.22	\$20.41
CPT CODE		Excision, malignant lesion; trunk,	\$75.68	\$19.88	\$60.14	\$12.61	\$63.00	\$10.23	\$117.28	N.A.	\$84.93	\$30.61	\$91.60	\$5.26
		Excision, malignant lesion, face, e	\$70.48	\$12.11	\$64.54	\$15.36	\$69.25	\$14.56	\$111.55	\$29.23	\$82.60	\$19.04	\$87.68	\$19.09
CPT CODE	8	COMPLEX EXCISION, 8IOPSY & D			¥04.04	710.00	100120	11110						
APG#		Excision, benign lesion, except ski	\$68.37	\$7.33	\$64.07	\$13.62	\$76.47	\$9.28	\$78.18	\$26.00	\$89.41	\$28.17	\$84.71	\$24.34
CPT CODE		Excision, benign lesion, except ski	\$70.85	\$7.07	\$61.08	\$9.29	\$81.30	\$10.77	\$81.53	\$24.79	\$79.21	\$12.37	\$90.66	\$26.82
CPT CODE		Excision, malignant, lesion, face,	\$60.37	\$10.75	\$66.75	\$18.98	\$79.43	\$13.19	\$90.24	\$22.76	\$84.16	\$31.93	\$91.02	\$30.24
CPT CODE	9	LIPECTOMY & EXCISION WITH RE			V00.73	V10.50	V73.40	V10110	TOOLET	TEETTO	10.11.0			
APG#			\$79.88	\$5.39	\$97.92	\$74.88	\$112.98	N.A.	\$105.15	N.A.	\$143.33	\$88.40	N.A.	N.A.
CPT CODE		Excision, excessive skin and subc	\$91.51	\$26.56	\$83.62	\$17.70	\$89.53	N.A.	N.A.	N.A.	\$114.82	\$17.76	\$69.62	N.A.
CPT CODE		Excision, leg pressure ulcer, with I	\$114,41	\$26.56	\$108.38	\$30.03	N.A.	N.A.	N.A.	N.A.	\$133.89	\$49.85	\$104.46	N.A.
CPT CODE .		Ligation and division and completi	\$114.41	\$15.49	\$108.38	930.03	IV.A.	N.A.	III.A.	11.A.	7103.00	4-3.00	V.04,40	
APG#	10	SIMPLE SKIN REPAIR		10.00	150.00	\$14.33	\$44.63	\$14.05	\$90.01	\$23.80	\$77.24	\$16.76	\$47.39	N.A.
CPT CODE		Simple repair of superficial wound	\$77.24	\$6.09	\$50.03		\$48.28	\$11.70	\$88.00	\$23.80	\$79.16	\$21.43	\$58.72	\$13.00
CPT CODE		Simple repair of superficial wound	\$82.18	\$29.34	\$53.12	\$18.09	\$105.12		\$92.06	\$23.23	\$76.81	\$10.16	\$54.60	N.A.
CPT CODE		Layer closure of wounds of scalp	\$62.92	\$20.07	\$60.55	\$14.43	\$105.12	N.A.	932.06	923.23	970.81	¥10.16	704.00	N.A.
APG#	11	COMPLEX SKIN REPAIR	107.00	49.44	455.44	400.04	400.00	404.07	6110 00	N.A.	\$68.74	\$12.72	\$53.01	N.A.
CPT CODE		Simple repair or superficial wound	\$67.03	\$7.41	\$55.11	\$20.91	\$80.82	\$34.37	\$116.60	N.A.	\$73.02	\$23.76	\$53.62	N.A.
CPT CODE		Simple repair or superficial wound	\$60.67	\$6.16	\$56.04	\$20.54	\$83.24						\$53.62	N.A.
CPT CODE		Layer closure of wounds of face,	\$71.43	\$21.04	\$55.78	\$19.95	\$105.12	N.A.	N.A.	N.A.	\$78.89	\$13.46		
CPT CODE		Blepharoplasty, upper eyelid	\$58.98	\$4.14	\$66.46	\$18.21	\$50.60	N.A.	\$83.53	\$35.18	\$65.75	\$17.85	\$85.73	\$23.67
APG#	12	SKIN & INTEGUMENT GRAFT, TRA						-			170.10	110.00	100.00	100.07
CPT CODE	14060	Adjacent tissue transfer or rearran	\$81.39	\$8.99	\$74.79	\$12.16	\$139.87	N.A.	\$156.46	\$40.88	\$79.40	\$18.29	\$96.88	\$33.27

\$0.76

80 NEEDLE & CATHETER BIOPSY, ASPIRATION, LAVAGE & INTUBATION

94760 Noninvasive ear or pulse oximetry

NI A

\$12.00

ΝΔ

\$6.29

NΔ

NΔ

N.A.

N.A.

N.A.

N.A.

MEAN AND STANDARD DEVIATION FOR DIRECT SUPPLY COSTS BY FACILITY TYPE AND VOLUME - SURGICAL PROCEDURES

CPT CODE

	MEAN	AND STANDARD DEVIATION	ON FOR D	IRECT SU	IPPLY CO	STS BY F	ACILITY T			E - SURG	ICAL PRO	CEDURE	S	
								Supply C	osts					
						oitals						.C.s		
			Volu	ıme		ume	Volu			ume		ume		lume
			(1000-	2999)	(3000	-5999)	(600		(1000	-2999)	(3000	-5999)	(600	00+)
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	32000	Thoracentesis, puncture or pleural	\$67.95	\$35.27	\$103.41	\$56.89	N.A.	N.A.	N.A.	N.A.	\$91.96	N.A.	N.A.	N.A.
CPT CODE		Biopsy, lung or mediastinum, perc	\$62.08	\$8.59	\$37.45	\$14.63	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	81	SIMPLE ENDOSCOPY OF THE UPP	ER AIRWAY											
CPT CODE		Laryngoscopy, indirect (separate	\$35.90	\$9.08	\$34.55	\$14.14	\$50.62	\$5.37	\$88.85	N.A.	\$56.75	\$34.74	\$55.41	\$37.96
CPT CODE		Laryngoscopy, indirect (separate	\$46.98	\$18.30	\$34.97	\$7.77	\$51.76	\$6.98	\$82.50	N.A.	\$58.13	\$28.60	\$55.41	\$37.96
APG#	82	COMPLEX ENDOSCOPY OF THE U	PPER AIRWA	AY								l		
CPT CODE		Laryngoscopy, direct, operative w		\$17.70	\$35.09	\$8.19	\$64.54	\$24.41	\$62.35	\$36.71	\$52.24	\$16.80	\$36.17	\$9.70
CPT CODE		Laryngoscopy, direct, operative,	\$48,45	\$13.30	\$44.15	\$13.77	\$52.25	\$7.67	\$45.51	\$19.99	\$53.91	\$24.92	\$45.70	\$31.68
APG#	83	SIMPLE ENDOSCOPY OF THE LOV	VER AIRWAY	/										
CPT CODE		Bronchoscopy diagnostic, (flexible		\$12.81	\$75.26	\$26.94	\$77.05	\$10.50	\$115.76	\$17.36	\$66.99	\$10.29	\$52.60	N.A.
CPT CODE		Bronchoscopy with biopsy	\$60.94	\$24.27	\$77.39	\$30.10	\$75.41	\$16.29	\$82.76	N.A.	\$51.07	\$7.41	\$38.06	N.A.
APG#	84	COMPLEX ENDOSCOPY OF THE L	OWER AIRW	AY										
CPT CODE		Bronchoscopy w/ transbronchial I		\$71.21	\$111.11	\$25.12	\$96.16	\$7.69	\$88.24	N.A.	\$115.77	N.A.	N.A.	N.A.
CPT CODE		Bronchoscopy with transbronchial		\$14.72	\$94.03	\$37.33	\$77.98	\$20.36	N.A.	N.A.	\$115.87	N.A.	N.A.	N.A.
APG#	85	NASAL CAUTERIZATION & PACK												
CPT CODE		Control nasal hemorrhage, anterio		\$18.23	\$71.51	\$16.03	\$62.74	\$20.14	\$52.36	N.A.	\$86.41	\$1.17	\$63.93	N.A.
CPT CODE		Control nasal hemorrhage, anterio		\$21.61	\$67.00	\$18.29	\$79.81	\$8.15	N.A.	N.A.	\$86.01	\$11.01	\$49.28	N.A.
APG#	86	SIMPLE LIP, MOUTH & SALIVARY		CEDURES										
CPT CODE		Excision of lesion of tongue witho	\$66.80	\$4.96	\$59.74	\$5.84	\$64.63	\$7.85	\$73.20	N.A.	\$57.85	\$3.53	\$45.69	\$6.11
CPT CODE		Excision of lesion of tongue with	\$67.12	\$3.47	\$68.78	\$12.59	\$64.63	\$7.85	N.A.	N.A.	\$66.67	\$11.31	\$48.11	\$2.48
APG#	87	COMPLEX LIP, MOUTH, & SALIVA	ARY GLAND	PROCEDUR	ES									
CPT CODE		Vermilionectomy (lip shave), muc	\$72.24	\$14.35	\$67.99	\$13.77	\$58.13	N.A.	N.A.	N.A.	\$53.91	\$3.87	\$46.92	\$9.02
CPT CODE		Excision of parotid tumor or paroti	\$108.73	\$26.75	\$84.17	\$23.27	N.A.	N.A.	\$101.06	N.A.	\$77.66	\$4.91	\$79.63	\$11.58
APG#	88	MISCELLANEOUS SINUS, TRACH	EAL & LUNG	PROCEDUR	RES									1
CPT CODE		Sinusotomy, maxillary (antrotomy	\$81,27	\$18.76	\$87.95	\$38.12	\$65.24	\$17.15	\$130.36	N.A.	\$83.65	\$23.77	\$99.68	\$12.33
CPT CODE		Ethmoidectomy intranasal, anterio	\$77.59	\$14.12	\$78.31	\$26.61	\$77.66	N.A.	\$108.89	N.A.	\$75.48	\$21.31	\$83.08	\$21.27
APG#		EXERCISE TOLERANCE TESTS												
CPT CODE		Cardiovascular stress test using	\$2.78	\$2.98	\$6.45	\$5.25	\$8.97	\$5.38	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Cardiovascular stress test using	\$3,74	N.A.	\$2.59	N.A.	\$5.39	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	106	ECHOCARDIOGRAPHY		1										
CPT CODE		Echocardiography, real-time with i	\$1.92	\$0.58	\$4.43	\$5.55	\$7.11	\$6.14	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Doppler echocardiography, pulsed		\$0.57	\$6.02	\$4.26	\$5.11	\$3.83	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	108	CARDIAC ELECTROPHYSIOLOGIC												
CPT CODE		Cardioversion, elective, electrical	\$20.14	N.A.	N.A.	N.A.	\$52.45	\$39.08	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Induction of arrhythmia by electri	\$334.09	N.A.	N.A.	N.A.	\$309.28	\$282.53	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	109	VASCULAR CANNULATION WITH		CATHETER										
CPT CODE		Placement of central venous cath		\$100.93	\$207.90	\$162.80	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	\$76.47	\$17.70
CPT CODE		Cannula declotting without balloo	N.A.	N.A.	\$98.48	\$33.99	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	110	DIAGNOSTIC CARDIAC CATHETE												
CPT CODE		Combined left heart catheterizatio		N.A.	N.A.	N.A.	\$146.52	\$65.48	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Combined right and left heart cat		N.A.	N.A.	N.A.	\$244.87	\$120.92	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	111	ANGIOPLASTY & TRANSCATHET												
				N.A.	N.A.	N.A.	\$181.48	\$122.34	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
	75963	Percutaneous transluminal angion												
CPT CODE	75963	Percutaneous transluminal angiopl Percutaneous transluminal corona		N.A.	\$11.73	N.A.	\$1,122.63	\$602.44	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.

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	MEAI	N AND STANDARD DEVIATI	ON FOR D	IRECT SU	PPLY CO	STS BY F	ACILITY I			E - SURG	ICAL PRO	JCEDURE	5	
-								Supply C	osts					
						pitals						.C.s	Volume	
			Vol			ume	Volume		Volume		Volume			ume 00+)
			(1000	2999)	(3000	-5999)	(600		(1000	2999)	(3000	-5999)	(600	
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standar
PROCEDURES	1	APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviatio
APG#	296	COMPLEX ANTERIOR SEGMENT E	YE PROCED	URES EXCE	PT FOR GLA	UCOMA								
CPT CODE	65750	Keratoplasty, penetrating, include	N.A.	N.A.	\$45.52	N.A.	\$16.03	N.A.	\$195.78	\$37.38	\$252.87	\$177.24	\$514.31	\$416.1
CPT CODE		Removal of vitreous, anterior appr	\$106.72	\$38.24	\$105.43	\$42.03	\$31.26	N.A.	\$130.12	\$121.54	\$149.31	\$88.63	\$118.16	\$60.39
APG#	297	SIMPLE POSTERIOR SEGMENT EY	E PROCEDU	RES										
CPT CODE		Destruction of localized lesion of r	N.A.	N.A.	\$125.99	\$55.13	\$26.94	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Destruction of extensive or progre	N.A.	N.A.	\$164.97	N.A.	\$21.74	N.A.	\$5.85	N.A.	\$49.73	N.A.	N.A.	N.A.
APG#	298	COMPLEX POSTERIOR SEGMENT	FYE PROCE	DURES									l	
CPT CODE		Vitrectomy, mechanical, pars plan		\$72.30	\$121.48	\$61.75	N.A.	N.A.	\$152.84	\$110.31	\$117.54	\$32.50	\$105.61	\$2.38
CPT CODE		Repair of retinal detachment, one	\$144.71	N.A.	\$164.97	N.A.	\$130.29	N.A.	\$12.50	N.A.	\$87.40	N.A.	\$661.85	N.A.
APG#	299	STRABISMUS & MUSCLE EYE PRO	OCEDURES											
CPT CODE		Strabismus surgery on patient not		\$9.34	\$76.32	\$20.21	\$56.88	N.A.	\$74.19	\$24.38	\$95.36	\$49.59	\$81.34	\$35.79
CPT CODE		Strabismus surgery on patient not		\$27.08	\$84.80	\$8.68	\$62.88	N.A.	\$81.32	\$18.36	\$94.87	\$28.68	\$71.90	\$29.17
APG#	300	SIMPLE REPAIR & PLASTIC PROC		EYE										
CPT CODE		Excision of lesion of eye lid witho	\$80.60	\$27.17	\$76.45	\$14.40	\$43.31	N.A.	\$66.13	\$33.34	\$78.96	\$9.39	\$60.14	\$10.08
CPT CODE		Repair of entropion suture	\$67.92	\$15.49	\$68.38	\$20.81	\$43,31	N.A.	\$80.50	\$33.40	\$89.54	\$46.43	\$76.31	\$31.68
	301	COMPLEX REPAIR & PLASTIC PRO												
APG#		Repair of blepharoptosis (tarso)-le	\$69.46	\$14.97	\$61.65	\$21.78	\$70,05	\$37.82	\$79.15	\$37.66	\$64.60	\$16.87	\$81.15	\$58.78
CPT CODE		Dacryocystorhinostomy (fistulizati		\$16.95	\$121.52	\$30.50	\$69,18	\$22.17	\$114.48	\$35.79	\$95.73	\$23.10	\$62.26	\$3.38
CPT CODE		OTORHINOLARYNGOLOGIC FUNC			TILITOL	100.00			-					
APG#		Oscillating tracking test, with rec	\$15.79	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE			\$7.08	N.A.	N.A. *	N.A.	\$5.81	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	92585	Brainstem evoked response recor MAJOR EXTERNAL EAR PROCED		14.7	11.0.	14.74	40.01							
APG#			\$82.63	\$3.52	\$92.33	\$40.71	\$80.60	\$3.37	\$106.28	N.A.	\$69.24	N.A.	\$77.97	N.A.
CPT CODE		Excision exostosis (es), external a	\$89.43	\$23.11	\$116.36	\$59.34	\$78.22	N.A.	N.A.	N.A.	\$109.55	N.A.	\$69.19	N.A.
CPT CODE		Reconstruction of external auditor TYMPANOSTOMY & OTHER SIMP				955.54	V/0.22	14.75	140741		1100.01			
APG#	315		\$53.10	\$13.51	\$67.67	\$22.01	\$47.65	\$22.27	\$73.72	\$33.81	\$65.99	\$16.63	\$50.38	\$28.40
CPT CODE		Myringotomy including aspiration	\$46.88	\$17.76	\$55.87	N.A.	\$49.11	\$19.86	\$67.19	\$30.83	\$67.82	\$22.94	\$45.19	\$21.64
CPT CODE		Tympanostomy (requiring insertio TYMPANOPLASTY & OTHER COM				14.77.	V43.11	V13.00	407110	100.00	101100		-	
APG#	316		\$84.61	\$21.44	\$90.84	\$31.81	\$95.23	\$10.92	\$51.18	\$15.13	\$96.73	\$30.09	\$79,19	\$17.4
CPT CODE		Tympanoplasty w/o mastoidecto			\$99.52	\$34.83	\$102.05	\$20.57	N.A.	N.A.	\$132.06	N.A.	\$79.37	\$39.8
CPT CODE		Stapedectomy with re-establishm	\$108.52	\$29.65	\$99.52	\$34.03	\$102.05	920.57	IN.A.	14101	V152.00	141741	410101	100.0
APG#	317	INNER EAR PROCEDURES	447.07	NI A	\$72.55	N.A.	\$120.71	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Endolymphatic sac operation; wit	\$47.67	N.A.			\$120.71	N.A.	N.A.	N.A.	\$121.75	N.A.	N.A.	N.A.
CPT CODE ·		Revision fenestration operation	N.A.	N.A.	N.A.	N.A.	\$116.76	IN.A.	IV.M.	IN.A.	V121.70	14.75.	14.74	14.7
APG#		SIMPLE AUDIOMETRY					N 4	N. A	NI A	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Basic comprehensive audiometry	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.		N.A.	N.A.	N.A.	N.A.
CPT CODE		Tympanometry	\$2.90	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	IN.A.	H.A.
APG#	319	REMOVAL OF IMPACTED CERUM		-							100.00	440.70	104.45	A10.0
CPT CODE	69210	Removal impacted cerumen (sepa	\$35.68	\$12.11	\$0.81	N.A.	\$54.16	\$27.02	\$105.34	N.A.	\$33.38	\$19.70	\$21.45	\$18.9
AGGREGATE MEA	FOR ALL	SURGICAL PROCEDURES				105.40	10101	100.70	404.71	\$33.63	\$91.10	\$35.50	\$88.70	\$35.5
			\$85.21	\$24.95	\$83.13	\$35.47	\$84.81	\$32.76	\$94.71	P33.53	1 991.10	935.50	1 900.70	499.0

CPT CODE

	M	EAN AND STANDARD DEVIATION	OR DIR	ECT EQUIP	MENT CO	STS 8Y FA	CILITY T	YPE AND V	OLUME	- SURGICAL	PROCE	DURES		
-								Direct Equip	ment Cos	sts				
						spitals						S.C.s		
			Volume		Volume		Volume			olume		olume		olume
			(1000-2999)		(300	0-5999)	(6000+)		(1000-2999)		(3000-5999)		(6000+)	
SURGICAL	-			Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	33212	Insertion or replacement of pacema	\$11.20	\$1.25	\$15.66	\$11.63	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	33219	Repair of pacemaker with replacem	\$11.46	\$1.25	\$9.93	\$12.88	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	113	REMOVAL & REVISION OF PACEMA	KER & V.	ASCULAR D	EVICE							1		
CPT CODE		Insertion, replacement, or reposition		\$0.87	\$14.95	\$16.30	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Removal of implantable intravenous	\$7.68	\$5.36	\$5.84	\$7.33	\$9.75	N.A.	N.A.	N.A.	\$0.89	\$0.21	\$5.78	\$7.18
APG#	114	MINOR VASCULAR REPAIR & FISTU												
CPT CODE		Thrombectomy and/or repair of arter		\$3.03	\$3,34	\$3.48	\$0.70	N.A.	N.A.	N.A.	\$6.07	N.A.	N.A.	N.A.
CPT CODE		Insertion of implantable intravenous		\$1,46	\$7.91	\$3.71	\$9.75	N.A.	N.A.	N.A.	\$8.22	\$5.05	\$10.51	\$0.49
APG#	115	SECONDARY VARICOSE VEINS & V	ASCULA!	RINJECTION	N					1				
CPT CODE		Ligation, division, and/or excision of	\$1,11	\$0.30	\$1,12	\$0.44	\$2.34	\$2.18	\$0.85	N.A.	\$2.62	\$3.73	\$0.75	\$0.07
CPT CODE		Unlisted procedure, vascular surgery	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#		VASCULAR LIGATION										T		
		Ligation, major artery (e.g., post-tra	\$4,72	\$2.35	\$2.88	\$2.67	\$8.21	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Interrupting, partial or complete, or	\$1.87	\$2.35	\$1.96	\$2.54	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE				\$0.27	\$1.11	\$0.44	\$3.88	N.A.	\$1.31	\$0.79	\$0.74	\$0.40	\$0.78	\$0.08
CPT CODE		Ligation and division and complete s CARDIOPULMONARY RESUSCITATI			V1.11	40.44	10100							
APG#	117		N.A.	N.A.	\$0.80	\$0.93	\$2.33	\$1.51	N.A.	N.A.	\$0.15	N.A.	\$0.15	N.A.
CPT CODE		Intubation, endotracheal, emergenc	N.A.	N.A.	N.A.	N.A.	\$2.24	\$1.28	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Cardiopulmonary resuscitation (e.g.,	IV.A.	IV.A.	IV.A.	14.74.	72.24	V1.20	14.741	1107.0	710.0			
APG#	131	CHEMOTHERAPY 8Y INFUSION	N.A.	N.A.	N.A.	N.A.	\$0.87	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy injection, intravenou			N.A.	N.A.	\$0.66	\$0.06	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy injection, intravenou	N.A.	N.A.	N.A.	N.A.	\$0.87	N,A,	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy inject, iv, complex, u	N.A.	N.A.	N.A.	IN.A.	\$0.67	14.60	14.70.	14.6.	14.70	1 140	1100	
APG#	132	CHEMOTHERAPY EXCEPT BY INFUS				N.A.	\$0.61	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy injection, intravenou	N.A.	N.A.	N.A.	N.A.	\$0.01	IV.A.	IV.M.	14.6.	14.00	1110	14071	14074
APG#	133	TRANSFUSION & PHLE80TOMY					\$0.34	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Transfusion, blood or blood compon	N.A.	N.A.	N.A.	N.A.		N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Push transfusion, blood, 2 years or	N.A.	N.A.	N.A.	N.A.	\$0.92	N.A.	N.A.	IV.A.	IV.A.	IN.M.	14.74.	14.0
APG#	134	8LOOD & 8LOOD PRODUCT EXCHA				1			A1 A	N. A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	36455	Exchange transfusion, blood, other t	N.A.	N.A.	N.A.	N.A.	\$0.92	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	36520	Therapeutic apheresis (plasma and/	N.A.	N.A.	N.A.	N.A.	\$0.92	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	IV.A.
APG#	135	DEEP LYMPH STRUCTURE & THYRO						-			10.01	\$0.29	\$0.79	\$0.12
CPT CODE		Biopsy or excision of lymph node(s);		. \$0.33	\$1.03	\$0.44	\$1.70	\$1.28	\$0.72	\$0.33	\$0.91			\$0.12
CPT CCDE	38525	Siopsy or excision of lymph node(s);	\$1.00	\$0.33	\$0.87	\$0.30	\$1.70	\$1.28	\$0.72	\$0.33	\$0.95	\$0.31	\$0.79	\$0.12
APG#	157	ALIMENTARY TESTS AND SIMPLE T	USE PLA	CEMENT										
CPT CODE	91010	Esophageal motility study	N.A.	N.A.	\$0.90	N.A.	\$6.42	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	91030	Esophagus, acid perfusion (Bernstei	N.A.	N.A.	\$0.33	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	158	ESOPHAGEAL DILATION WITHOUT	ENDOSC	OPY										
CPT CODE		Dilation of esophagus, by unguided	\$1.98	\$1.38	\$1.30	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	\$9.76	\$8.07
CPT CODE		Dilation of esophagus, by unguided	\$0.80	N.A.	\$1.30	N.A.	N.A.	N.A.	\$0.15	N.A.	N.A.	N.A.	\$9.76	\$8.07
APG#	159	PERCUTANEOUS & OTHER SIMPLE	GASTRO	INTESTINAL	L 8IOPSY			1						
CPT CODE		Siopsy of liver, percutaneous needle		N.A.	\$0.75	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Siopsy, abdominal or retroperitoneal	N.A.	N.A.	N.A.	N.A.	\$1.55	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	· N.A.
CPT CODE		Esophageal intubation and collection	N.A.	N.A.	\$5.75	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	160	ANDSCOPY WITH BIOPSY & DIAGN	OSTIC P	ROCTOSIGN	MOIDOSC	OPY								
CPT CODE		Proctosigmoidoscopy diagnostic (se		\$1.22	\$3.74	\$0.87	\$2.39	N.A.	\$5.60	N.A.	\$6.56	\$1.36	\$4.15	N.A.

		MEAN AND STANDARD DEVIATION	ON FOR P	HARMACEL	ITICAL CO	STS BY FA	CILITY TY	Pharmaceut	LUME • S	URGICAL P	KOCEDO	RES		
*6					111-	pitals		Pharmaceu	icai Costs		Λ.	S.C.s		
							Mal		Volume		Volume		Vo	lume
			Volume (1000-2999)		Volume (3000-5999)		Volume (6000+)		(1000-2999)		(3000-5999)			00+)
			(1000		(300	Standard	(00)	Standard	(1000	Standard	(300)	Standard	100	Standard
SURGICAL				Standard		Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	\$10.21	\$12.97	\$7.96	\$4,17	\$12.86	\$4.37	\$10.91	\$14.13	\$14.03	\$9.14
CPT CODE		Split graft, trunk, scalp, arms, legs,	\$5.34	\$5.81		\$2.20	\$3,45	\$0.69	\$2.94	N.A.	\$5.72	\$4.38	\$7.35	\$6.27
CPT CODE		Full thickness graft, free, including d	\$2.56	\$0.68	\$3.43	\$2.20	\$3.45	\$0.05	42.54	14.0.	VU.12	V4.00	47100	10121
APG#	27	SIMPLE INCISION & EXCISION OF 8F			40.00	\$6.93	\$8.35	\$4,21	\$14.18	\$4.07	\$5.91	\$4.34	\$11.34	\$12.36
CPT CODE		Biopsy of breast, incisional	\$10.07	\$15.10	\$6.69	\$7.27	\$9.30	\$4.19	\$8.65	\$5.85	\$7.29	\$5.82	\$5.74	\$6.84
CPT CODE		Excision or cyst, fibroadenoma, or ot	\$12.36	\$11.02	\$7.78	\$7.27	\$9.30	\$4.19	\$0.00	\$5.65	\$7.25	93.02	70.74	V0.04
APG#	28	BREAST RECONSTRUCTION & MAS				\$6.63	\$7.11	\$5.87	\$10.68	\$4.86	\$6.59	\$3,49	\$10.82	\$14.93
CPT CODE		Mastectomy for gynecomastia throu	\$5.67	\$4.42	\$7.11		\$7.11	\$4,34	\$10.68	\$16.50	\$8.14	\$6,21	\$13.28	\$17.25
CPT CODE		Mastectomy, partial	\$4.51	\$5.04	\$5.86	\$6.06	\$5.25	\$3.99	\$7.96	N.A.	\$8.09	\$5.53	\$13.39	\$17.13
CPT CODE		Mastectomy, subcutaneous	\$4.25	\$3.78	\$6.78	\$6.96	\$5.75	\$3.99	\$7.90	N.A.	\$0.05	40.03	913.33	V17.15
APG#	53	OCCUPATIONAL THERAPY						- AL A	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Training in activities of daily living (s	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.			N.A.	N.A.	N.A.	N.A.
CPT CODE		Training in activities of daily living (s	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	IV.A.	IN.M.
APG#	54	PHYSICAL THERAPY							N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Physical medicine treatment to one	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.		N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Physical medicine treatment to one	N.A.	N.A.	N.A.	N.A.	\$0.91	\$0.24	N.A.	N.A.	N.A.	N.A.	N.A.	IV.A.
APG#	55	DIAGNOSTIC ARTHROSCOPY				-			405.40	400.00	\$11.67	\$4,36	\$28.79	\$32.45
CPT CODE		Arthroscopy, shoulder, diagnostic, w	\$9.91	\$5.12	\$15.44	\$8.73	\$17.70	\$14.30	\$25.43	\$22.03	\$11.07	\$6.31	\$15.33	\$9.54
CPT CODE	29870	Arthroscopy, knee, diagnostic, with	\$10.70	\$11.01	\$12.90	\$9.38	\$15.82	\$10.88	\$29.98	\$29.33	\$11.35	\$6.31	\$15.33	99.54
APG#	56	THERAPEUTIC ARTHROSCOPY								110.00	145.07	10.00	\$21.77	\$5.11
CPT CODE	29877		\$11.42	\$7.98	\$14.62	\$8.67	\$15.20	\$6.34	\$36.85	\$18.23	\$15.37	\$8.29	\$14.17	\$7,90
CPT CODE	29881	Arthroscopy, knee, surgical with me	\$9.87	\$4.20	\$13.48	\$7.29	\$14.89	\$7.09	\$6.34	\$4.04	\$13.08	\$4.78	\$14.17	\$7.90
APG#	57	REPLACEMENT OF CAST								1000	10.53		\$0.89	N.A.
CPT CODE	29075	Application elbow to finger (short ar	\$4.69	\$5.92	\$0.89	N.A.	\$2.96	N.A.	\$4.69	\$2.67	\$9.57	N.A.	\$0.89	N.A.
CPT CODE	29405	Application	\$2,36	\$1.51	N.A.	N.A.	N.A.	N.A.	\$5.75	\$4.17	\$9.57	N.A.	\$0.89	N.A.
APG#	58	SPLINT, STRAPPING & CAST REMO				1							10.00	
CPT CODE	29125	Application of short arm splint (forea		\$6.17	\$0.89	N.A.	\$2.96	N.A.	\$3.75	\$4.01	\$5.43	\$1.18	\$0.89	N.A.
CPT CODE	29580	Strapping unna boot	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	59	TREATMENT OF CLOSED FRACTUR	E & DISLO								-	1		
CPT CODE	21800	Treatment of rib fracture, closed, un		N.A.	\$3.00	N.A.	\$0.17	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	26720	Treatment of closed phalangeal shaf	\$3.78	\$4.45	\$2.55	\$1.90	\$1.94	\$1.44	\$0.89	N.A.	\$5.69	\$4.71	\$0.89	N.A.
APG#	60	TREATMENT OF CLOSED FRACTUR				ER, TOE & R	18						1000	10.00
CPT CODE	25600	Treatment of closed distal radial frac		\$1.29	\$2.02	\$2.65	\$3.00	N.A.	\$5.36	\$3.61	\$12.49	\$3.33	\$0.89	\$0.00
CPT CODE		Treatment of closed distal radial frac		\$11.80	\$4.72	\$6.73	\$3.00	N.A.	\$7.16	\$0.18	\$10.51	\$2.68	\$0.89	\$0.00
CPT CODE	28470	Treatment of closed metatarsal fract	\$1.59	\$1.00	\$2.08	\$2.06	\$2.96	N.A.	\$6.13	N.A.	\$3.55	\$3.84	\$0.54	\$0.49
APG#	62	TREATMENT OF OPEN FRACTURE &	DISLOCA	TION EXCER		1		1	1					
CPT CODE	25615	Treatment of open distal radial fract	\$9.59	\$4.45	\$10.90	\$8.16	\$4.40	N.A.	N.A.	N.A.	\$13.36	\$5.03	\$3.32	N.A.
CPT CODE		Open treatment of closed or open di	\$7.52	\$3.33	\$10.79	\$9.77	\$1.02	N.A.	\$15.46	N.A.	\$14.59	\$5.87	\$3.19	\$0.18
CPT CODE	26735	Open treatment of closed or open ph	\$7.32	\$4.17	\$8.54	\$9.26	\$3.65	\$0.98	\$24.93	N.A.	\$11.58	\$5.02	\$4.17	\$1.21
APG#	63	JOINT MANIPULATION UNDER ANE	STHESIA											
CPT CODE	23700	Manipulation under anesthesia, shou		\$0.96	\$2.32	\$2.54	\$0.89	N.A.	\$12.01	\$9.47	\$4.18	\$4.14	\$3.10	\$3.83
CPT CODE	27570	Manipulation of knee joint under gen	\$1.82	\$0.82	\$2.06	\$2.62	\$14.30	\$16.03	\$5.46	N.A.	\$6.20	\$4.89	\$4.99	\$7.11
APG#	64	SIMPLE MAXILLOFACIAL PROCEDU												
CPT CODE	30000	Drainage of hematoma, nasal, intern		\$2.06	\$17.93	\$28.35	\$19.56	N.A.	\$6.58	N.A.	\$7.95	\$6.20	\$3.66	\$3.11
CPT CODE	30110	Excision, nasal polyp(s), simple unila	\$10.67	\$19.58	\$20.66	\$29.25	\$0.89	N.A.	\$6.21	N.A.	\$12.01	\$8.80	\$3.37	\$3.51
CPT CODE		Excision, nasal polyp(s), simple bilat	\$10.21	\$17.82	\$20.81	\$27.49	\$3.34	N.A.	\$34.92	N.A.	\$9.80	\$4.00	\$3.64	\$3.13

		MEAN AND STANDARD DEVIATION	N FOR PI	HARMACEU	TICAL CO	STS BY FA	CILITY TY	PE AND VU	LUIVIE - S	UNGICAL	HOCEDO	neo		
								Pharmaceut	ical Costs					
						pitals					A.S.C.s Volume		17-1	lume
	-:-			ume		lume	Volume		Volume					00+)
			(1000	-2999)	(3000	-5999)	(60)	00+)	(1000	-2999)	(3000	)-5999)	(60)	
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	32000	Thoracentesis, puncture or pleural c	\$4.20	\$2.48	\$4.24	\$2.17	N.A.	N.A.	N.A.	N.A.	\$0.84	N.A.	N.A.	N.A.
CPT CODE	32405	Biopsy, lung or mediastinum, percut	\$2.19	\$2.02	\$2.99	\$3.26	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	81	SIMPLE ENDOSCOPY OF THE UPPER	AIRWAY											
CPT CODE	31505	Laryngoscopy, indirect (separate pro		\$11.38	\$5.10	\$5.77	\$3.84	\$4.19	\$3.53	N.A.	\$6.05	\$5.15	\$7.20	\$8.92
CPT CODE		Laryngoscopy, indirect (separate pro		\$10.18	\$5.35	\$5.39	\$3.84	\$4.19	\$3.53	N.A.	\$8.40	\$4.25	\$7.20	\$8,92
APG#	82	COMPLEX ENDOSCOPY OF THE UPP	ER AIRWA	Y										
CPT CODE	31535	Laryngoscopy, direct, operative with		\$4.11	\$5.76	\$5.46	\$6.47	\$5.42	\$3.44	\$1.09	\$5.93	\$4.96	\$6.31	\$8.88
CPT CODE		Laryngoscopy, direct, operative, wit	\$4.24	\$6.35	\$5.36	\$5.71	\$3.84	\$4.19	\$6.29	\$4.24	\$7.20	\$8.44	\$5.29	\$7.13
APG#	83	SIMPLE ENDOSCOPY OF THE LOWE	RAIRWAY											
CPT CODE		Bronchoscopy diagnostic, (flexible or		\$8.61	\$19.39	\$15.23	\$18.00	\$9.12	\$9.40	\$3.96	\$17.05	\$12.67	\$7.31	N.A.
CPT CODE		Bronchoscopy with biopsy	\$17.58	\$28.30	\$16.42	\$14.22	\$14.41	\$5.88	\$13.85	N.A.	\$24.37	\$26.54	\$6.22	N.A.
APG#	84	COMPLEX ENDOSCOPY OF THE LOV	VER AIRW.	AY										
CPT CODE		Bronchoscopy w/ transbronchial lun	\$23.19	\$28.44	\$20.02	\$16.74	\$29.65	\$18.53	\$7.04	N.A.	\$42.27	N.A.	N.A.	N.A.
CPT CODE		Bronchoscopy with transbronchial n	\$16.37	\$8.73	\$14.74	\$13.97	\$16.45	\$6.71	N.A.	N.A.	\$15.85	N.A.	N.A.	N.A.
APG#	85	NASAL CAUTERIZATION & PACKING	3											
CPT CODE		Control nasal hemorrhage, anterior,	\$2.09	\$1.11	\$2.75	\$1.50	\$8.51	\$12.49	\$2.06	N.A.	\$7.77	\$5.93	\$6.49	N.A.
CPT CODE		Control nasal hemorrhage, anterior,	\$10.16	\$9.17	\$4.83	\$1.56	\$6.13	\$6.24	N.A.	N.A.	\$10.41	\$8.03	\$5.59	N.A.
APG#	86	SIMPLE LIP, MOUTH & SALIVARY G	LAND PRO	CEDURES										
CPT CODE		Excision of lesion of tongue without	\$3.45	\$2.66	\$3.33	\$2.43	\$1.81	\$1.32	\$16.47	N.A.	\$7.15	\$4.94	\$1.46	\$0.81
CPT CODE		Excision of lesion of tongue with clo	\$4,31	\$2.87	\$3.77	\$2.62	\$1.81	\$1.32	N.A.	N.A.	\$8.79	\$5.62	\$1.18	\$0.40
APG#	87	COMPLEX LIP, MOUTH, & SALIVAR	Y GLAND F	ROCEDURE	s ,									l
CPT CODE		Vermilionectomy (lip shave), mucosa		\$2,42	\$6.26	\$5.04	\$1.72	N.A.	N.A.	N.A.	\$8.55	\$5.08	\$1.46	\$0.81
CPT CODE		Excision of parotid tumor or parotid	\$5.80	\$4.19	\$5,64	\$6.41	N.A.	N.A.	\$4.95	N.A.	\$9.29	\$4.91	\$4.15	\$3.00
APG#	88	MISCELLANEOUS SINUS, TRACHEA			S									
CPT CODE		Sinusotomy, maxillary (antrotomy); r	\$22.17	\$30.69	\$16.47	\$19.54	\$35.95	\$13.11	\$35.60	N.A.	\$12.31	\$5.60	\$13.06	\$16.23
CPT CODE		Ethmoidectomy intranasal, anterior	\$6.02	\$2.71	\$14.48	\$17.33	\$11.15	N.A.	\$36.53	N.A.	\$12,18	\$4.91	\$19.63	\$21.35
APG#	105	EXERCISE TOLERANCE TESTS				-								
CPT CODE		Cardiovascular stress test using max	N.A.	N.A.	\$0.02	N.A.	\$0.01	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	93017			N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	106	ECHOCARDIOGRAPHY												
CPT CODE		Echocardiography, real-time with im	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Doppler echocardiography, pulsed w	N.A.	N.A.	N.A.	N.A.	\$20.55	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	108	CARDIAC ELECTROPHYSIOLOGIC TI												
CPT CODE		Cardioversion, elective, electrical co	N.A.	N.A.	N.A.	N.A.	\$14.05	\$8.31	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
		Induction of arrhythmia by electrical	N,A.	N.A.	N.A.	N.A.	\$9.07	\$0.20	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	109	VASCULAR CANNULATION WITH N			1417.0									
APG#		Placement of central venous cathete		\$8.46	\$9.83	\$8.99	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	\$17.35	\$4.70
CPT CODE		Cannula declotting without balloon c		N.A.	\$6.35	\$5.82	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE APG#	110	DIAGNOSTIC CARDIAC CATHETERI			1.1100	1,3102								
		Combined left heart catheterization,	N.A.	N.A.	N.A.	N.A.	\$100.57	\$67.55	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Combined right and left heart cathet		N.A.	N.A.	N.A.	\$99.95	\$67.06	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
	111	ANGIOPLASTY & TRANSCATHETER						1						1
APG#		Percutaneous transluminal angioplas	N.A.	N.A.	N.A.	N.A.	\$154.90	\$105.61	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Percutaneous transluminal angiopias  Percutaneous transluminal coronary	N.A.	N.A.	\$0.02	N.A.	\$165.84	\$174.99	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.

		MEAN AND STANDARD DEVIATION	N FOR PH	ARMACEU	TICAL CO	STS BY FA	CILITY IY	Pharmaceut	LUIVIE - SI	JRGICAL P	KOCEDO	neo		
								Pharmaceur	icai Costs		A .	S.C.s		
						pitals							Val	ume
				ume		ume		ume		ume		lume		
			(1000	-2999)	{3000	-5999)	(600	00+}	{1000	-2999)	(3000	0-5999)	(600	00+)
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	65750	Keratoplasty, penetrating, includes a	N.A.	N.A.	\$21.49	N.A.	\$4.51	N.A.	\$47.63	\$33.95	\$22.09	\$23.22	\$60.00	\$50.79
CPT CODE		Removal of vitreous, anterior approa	\$63.69	\$29.33	\$89.81	\$37.03	\$5.29	N.A.	\$92.26	\$35.34	\$48.96	\$28.96	\$43.35	\$40.39
APG#	297	SIMPLE POSTERIOR SEGMENT EYE F	ROCEDUR	ES										
CPT CODE		Destruction of localized lesion of reti	N.A.	N.A.	\$9.49	\$1.97	\$2.96	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Destruction of extensive or progressi	N.A.	N.A.	\$10.88	N.A.	\$2.96	N.A.	\$3.25	N.A.	\$2.20	N.A.	N.A.	N.A.
APG#	298	COMPLEX POSTERIOR SEGMENT EY		URES										
CPT CODE		Vitrectomy, mechanical, pars plana	\$60.58	\$47.35	\$58.96	\$1,53	N.A.	N.A.	\$121.13	\$54.38	\$82.34	\$85.59	\$62.16	\$24.89
CPT CODE		Repair of retinal detachment, one or	\$85.45	N.A.	\$10.88	N.A.	\$17.91	N.A.	\$0.19	N.A.	\$22.50	N.A.	\$44.13	N.A.
APG#	299	STRABISMUS & MUSCLE EYE PROC												
CPT CODE		Strabismus surgery on patient not pr		\$2.74	\$10.75	\$14.39	\$4.03	N.A.	\$12.42	\$11.40	\$16.21	\$19.15	\$10.50	\$12.65
CPT CODE		Strabismus surgery on patient not pr		\$15.66	\$4.08	\$2.62	\$4.03	N.A.	\$16.80	\$17.35	\$8.71	\$6.77	\$9.26	\$10.51
	300	SIMPLE REPAIR & PLASTIC PROCED	URES OF F											
APG#		Excision of lesion of eye lid without	\$10.35	\$16.21	\$4,45	\$3.39	\$3.86	N.A.	\$8.78	\$9.43	\$3.85	\$2.41	\$10.80	\$12.63
CPT CODE		Repair of entropion suture	\$7.81	\$8.63	\$3.24	\$2.53	\$3.86	N.A.	\$10.92	\$9.58	\$16.67	\$20.62	\$14.24	\$13.65
CPT CODE	301	COMPLEX REPAIR & PLASTIC PROC			1012									
APG#		Repair of blepharoptosis (tarso)-levat	\$7.37	\$9.58	\$3.05	\$0.87	\$10.09	\$8,81	\$21.41	\$18.94	\$19.05	\$20.16	\$8.93	\$8.46
CPT CODE	67904	Dacryocystorhinostomy (fistulization	6112.67	\$10.22	\$85.67	\$113.37	\$6,48	\$3.08	\$43.50	\$51.56	\$49.39	\$45.83	\$66.67	\$6.17
CPT CODE	313	OTORHINOLARYNGOLOGIC FUNCTION	ON TESTS	VIOLEE	+00.07	*******								
APG#		Oscillating tracking test, with record	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE			\$2.52	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Brainstem evoked response recordin MAJOR EXTERNAL EAR PROCEDUR		14.74.	14.70	14.73	141741	110.0	1			1		
APG#	314			\$1.15	\$7.10	\$2.42	\$10.53	\$8.97	\$5.05	N.A.	\$2.51	N.A.	\$89.02	N.A.
CPT CODE		Excision exostosis (es), external audi	\$3.90	\$0.97	\$8.31	\$4.94	\$4.18	N.A.	N.A.	N.A.	\$2.51	N.A.	\$18.49	N.A.
CPT CODE		Reconstruction of external auditory				94.54	34,10	14.6.	14.75.	14170	72101	110.0		
APG#	315	TYMPANOSTOMY & OTHER SIMPLE			\$7.17	\$4.16	\$3.83	\$3.15	\$4.56	\$0.74	\$12.47	\$9.57	\$4.44	\$2,45
CPT CODE		Myringotomy including aspiration an		\$6.66		N.A.	\$10.24	\$3.15	\$11.71	\$14.97	\$9.53	\$9.57	\$8.10	\$6.96
CPT CODE		Tympanostomy (requiring insertion o	\$7.93	\$7.95	\$7.94	N.A.	\$10.24	93.52	\$11.71	714.07	75.55	45.57	40.10	+0.00
APG#	316	TYMPANOPLASTY & OTHER COMPL				\$6.04	\$9.40	\$2,35	\$6.24	N.A.	\$13.41	\$7.47	\$13.88	\$5.77
CPT CODE		Tympanoplasty w/o mastoidectomy	\$12.20	\$9.15	\$10.85			\$7.78	N.A.	N.A.	\$8.13	N.A.	\$13.00	\$6.39
CPT CODE	69660	Stapedectomy with re-establishment	\$7.03	\$4.82	\$15.94	\$3.18	\$16.56	\$7.78	IN.A.	IV.A.	90.13	14.74.	V13.37	40.00
APG#	317	INNER EAR PROCEDURES							N. A.	N. A	N.A.	N.A.	N.A.	N.A.
CPT CODE		Endolymphatic sac operation; with s	\$3.31	N.A.	\$2.59	N.A.	\$11.01	N.A.	N.A.	N.A.	\$2.12	N.A.	N.A.	N.A.
CPT CODE	69840	Revision fenestration operation	N.A.	N.A.	N.A.	N.A.	\$4.91	N.A.	N.A.	N.A.	\$2.12	IN.A.	IV.A.	IV.A.
APG#	318	SIMPLE AUDIOMETRY		1					1111	11.6	11.0	N. A	N. A.	N.A.
CPT CODE	92557	8asic comprehensive audiometry	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	92567	Tympanometry	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	319	REMOVAL OF IMPACTED CERUMEN							1		100	40.05	44.75	40.45
CPT CODE	69210	Removal impacted cerumen (separat	\$3.69	\$0.74	\$0.50	N.A.	\$4.75	\$3.84	\$8.87	N.A.	\$8.21	\$8.05	\$4.77	\$2.45
		URGICAL PROCEDURES										1		
			\$10.30	\$7.25	\$13,66	\$10.39	\$16.59	\$14.17	\$16.66	1 \$14.17	\$12.83	\$8.82	\$13.10	\$9.42

	MEAN	AND STANDARD DEVIATION	FOR A	NESTHES	IA COST	S BY FAC	ILITY TY			- SURGIC	AL PRO	CEDURE	5	
								Anesthe	sia Costs					
						spitals						S.C.s		
				lume		lume		ume		ume		lume		ume
			(100	0-2999)	(3000	-5999)	(60)	00+)	(1000	-2999)	(3000	)-5999)	(600	00+)
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
APG#	2	SUPERFICIAL NEEDLE BIOPSY & ASP	IRATION											
CPT CODE		Puncture Aspiration of Cyst of Breast		N.A.	\$17.01	\$18.49	\$15.83	\$2.32	\$9.50	N.A.	\$2.45	\$0.77	\$0.19	N.A.
CPT CODE		Biopsy of breast, needle (separate pr	N.A.	N.A.	\$31.38	\$36.92	\$13.81	N.A.	\$9.50	N.A.	\$24.50	\$38.79	\$23.10	\$32.40
CPT CODE		Biopsy, thyroid, percutaneous needle	N.A.	N.A.	\$33.49	N.A.	\$89.60	N.A.	N.A.	N.A.	N.A.	N.A.	\$122.29	N.A.
APG#	3	SIMPLE INCISION & DRAINAGE												
CPT CODE		Incision and drainage of infected or n	\$33.55	\$19.17	\$24.43	\$20.20	\$35.70	\$25.56	\$96.66	N.A.	\$48.07	\$15.50	\$23.28	\$22.01
CPT CODE		Incision and drainage of abscess (e.g.		\$21.85	\$23.46	\$20.59	\$65.84	\$0.67	\$69.11	\$67.12	\$29.65	\$32.31	\$23.75	\$21.34
CPT CODE		Incision & removal of foreign body su		\$21.41	\$22.28	\$17.18	\$20.83	\$30.30	\$44.36	\$61.94	\$27.58	\$22.96	\$28.23	\$15.96
APG#	4	COMPLEX INCISION AND DRAINAGE												
CPT CODE		Incision and drainage of hematoma; of	\$42.70	\$12.71	\$46.57	\$24.51	\$76.77	N.A.	\$51.94	\$24.59	\$62.62	\$28.55	\$39.51	\$6.39
CPT CODE		Incision and drainage, complex, post-		\$18.78	\$59.28	\$17.89	\$79.80	\$13.86	\$32.14	N.A.	\$48.28	\$31.03	\$34.99	N.A.
CPT CODE		Incision and drainage, upper arm or el		\$15.38	\$43.89	\$27.73	\$56.86	\$18.58	\$112.22	N.A.	\$24.29	\$6.37	\$34.99	N.A.
CPT CODE		Deep dissection below fascia, for dee		\$17.95	\$53.24	\$25.67	\$148.45	N.A.	N.A.	N.A.	\$20.15	\$15.92	\$10.04	N.A.
APG#	5	COMPLEX INCISION AND DRAINAGE												
CPT CODE		Debridement of nails, manual; five or	\$11.75	\$9.28	\$10.78	\$18.41	\$40.80	\$27.85	\$6.92	N.A:	\$15.18	\$1.19	\$15.74	\$21,11
CPT CODE		Debridement of nails, manual each a		\$9.90	\$11.47	\$18.13	\$40.80	\$27.85	\$6.92	N.A.	\$15.24	\$1.21	\$13.59	\$13.64
APG#	6	SIMPLE DESRIDEMENT & DESTRUCT												
CPT CODE		Debridement of skin, partial thicknes		\$13.21	\$35.68	\$13.88	\$45.59	N.A.	\$74.04	N.A.	\$48.74	\$29.94	\$31.10	\$15.14
CPT CODE		Avulstion of nail plate, partial or com		\$19.88	\$26.23	\$21.01	\$40.80	\$27.85	\$100.48	N.A.	\$21.99	\$24.63	\$24.85	\$20.09
CPT CODE		Destruction by any method, with or	\$5.20	N.A.	\$12.64	\$16.87	\$8.78	\$8.93	\$3.80	N.A.	\$8.97	\$12.13	\$2.86	\$3.71
CPT CODE		Removal of implant superficial, (e.g.,	\$41.47	\$14.27	\$75.30	\$70.37	\$65.58	\$12.95	\$65.34	\$32.19	\$42.94	\$27.05	\$38.19	\$10.94
APG#	7	SIMPLE EXCISION & BIOPSY												
CPT CODE		Excision, benign lesion, except skin t	\$38.07	\$32.09	\$33.81	\$21.13	\$24.64	\$35.39	\$35.09	\$53.07	\$48.58	\$13.09	\$19.14	\$16.96
CPT CODE	11440	Excision, other benign lesion (unless	\$27.86	\$21.70	\$27.28	\$23.86	\$30.43	\$32.38	\$24.34	\$50.01	\$25.40	\$27.46	\$20.98	\$17.40
CPT CODE		Excision, malignant lesion; trunk, arm		\$21.98	\$44.92	\$31.06	\$71.66	\$5.70	\$95.14	N.A.	\$25.57	\$32.06	\$22.65	\$16.09
CPT CODE		Excision, malignant lesion, face, ears		\$20.76	\$41.59	\$35.22	\$77.96	\$10.91	\$42.74	\$46.82	\$49.62	\$23.47	\$33.27	\$10.31
APG#	8	COMPLEX EXCISION, BIOPSY & DEB		T										
CPT CODE		Excision, benign lesion, except skin t		\$19.45	\$23.74	\$27.76	\$54.23	\$15.76	\$38.48	\$42.13	\$37.10	\$25.30	\$19.34	\$16.72
CPT CODE		Excision, benign lesion, except skin t		\$23.06	\$24.81	\$27.71	\$47.77	\$17.60	\$38.42	\$44.20	\$44.81	\$31.51	\$22.43	\$15.50
CPT CODE		Excision, malignant, lesion, face, ear	\$27.74	\$25.28	\$28.56	\$28.67	\$37.27	\$39.75	\$43.25	\$34.08	\$36.68	\$31.19	\$36.86	\$7.25
APG#	9	LIPECTOMY & EXCISION WITH RECO		TION										
CPT CODE		Excision, excessive skin and subcuta		\$13.09	\$48.55	\$34.96	\$52.65	N.A.	\$113.65	N.A.	\$61.12	\$28.57	N.A.	N.A.
CPT CODE		Excision, leg pressure ulcer, with loc	\$46.07	\$25,48	\$42.56	\$36.14	\$95.11	N.A.	N.A.	N.A.	\$45.38	\$27.34	\$35.35	N.A.
CPT CODE		Ligation and division and completion	\$58.51	\$31.75	\$71.43	\$36.70	N.A.	N.A.	N.A.	N.A.	\$68.62	\$20.62	\$35.62	N.A.
APG#	10	SIMPLE SKIN REPAIR				1								
CPT CODE		Simple repair of superficial wounds o	\$27.56	\$6.17	\$49.51	\$37.26	\$43.44	\$45.68	\$56.84	\$74.70	\$48.91	\$7.68	\$0.19	N.A.
CPT CODE		Simple repair of superficial wounds o		\$12.06	\$46.43	\$43.46	\$48.33	\$53.50	\$12.18	\$12.62	\$25.46	\$32.53	\$0.66	\$0.67
CPT CODE		Layer closure of wounds of scalp axi		\$19.03	\$39.81	\$39.79	\$47.73	N.A.	\$13.18	\$15.95	\$49.50	\$30.39	\$0.29	N.A.
APG#	11	COMPLEX SKIN REPAIR		1										
CPT CODE		Simple repair or superficial wounds o	\$39,56	\$22.46	\$18.50	\$17.28	\$26.60	\$29.88	\$105.59	N.A.	\$36.52	\$21.81	\$0.19	N.A.
CPT CODE		Simple repair of superficial wounds o		\$12.13	\$21,66	\$44.55	\$33.63	\$39.80	\$111.57	N.A.	\$41.32	\$24.73	\$34.81	N.A.
CPT CODE		Layer closure of wounds of face, ear			\$31.01	\$35.94	\$70.18	N.A.	N.A.	N.A.	\$45.21	\$27.01	\$1.76	N.A.
CPT CODE		Blepharoplasty, upper eyelid	\$16.14		\$25.86	\$24.98	\$2,46	N.A.	\$23.43	\$30.01	\$14.28	\$4.18	\$17.42	\$12.0
	15822	SKIN & INTEGUMENT GRAFT, TRAN				1	1	1						
APG#		Adjacent tissue transfer or rearrange			\$66.14	\$22.65	\$38,41	N.A.	\$31.05	\$6.40	\$67.31	\$30.80	\$36.46	\$8.87
CPT CODE	14060	Mujacent hoose transfer of realiange	1 +00.00	, , 5.00	1	1 2100		1						

	MEAN	AND STANDARD DEVIATION	FOR A	NESTHES	IA COST	S BY FAC	ILITY TY	PE AND V	OLUME	- SURGIC	AL PRU	CEDURE		
								Anesthe	sia Costs					
						pitals						S.C.s	24.1	lume
				lume		lume		lume		ume		lume		00 + )
			(100)	0-2999)	(3000	-5999)	(60)	00+)	(1000	-2999)	(3000	Standard	(600	Standa
SURGICAL				Standard		Standard		Standard		Standard			Mana	Deviati
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	\$37.4
CPT CODE	15100	Split graft, trunk, scalp, arms, legs, h	\$59.91	\$11.53	\$57.40	\$27.40	\$82.02	\$15.40	\$75.22	\$66.90	\$75.87	\$26.32	\$52.81	\$7.13
CPT CODE	15260	Full thickness graft, free, including di	\$62.87	\$10.88	\$54.59	\$28.80	\$96.21	\$4.67	\$4.15	N.A.	\$82.47	\$26.60	\$40.36	\$7.13
APG#	27	SIMPLE INCISION & EXCISION OF 8R	EAST									101.00	\$42.52	\$15.7
CPT CODE	19101	Biopsy of breast, incisional	\$47.61	\$14.74	\$64.79	\$36.16	\$63.49	\$43.30	\$82.82	\$49.62	\$61.23	\$31.09		\$23.1
CPT CODE	19120	Excision or cyst, fibroadenoma, or ot	\$42.03	\$20.42	\$40.65	\$19.91	\$39.43	\$30.78	\$30.65	\$34.25	\$52.17	\$30.56	\$49.68	\$23.1
APG#	28	BREAST RECONSTRUCTION & MAST	ECTOMY									100.00	444.54	447.0
CPT CODE	19140	Mastectomy for gynecomastia throug	\$48.66	\$15.18	\$78.41	\$26.81	\$40.88	\$34.28	\$74.26	\$69.64	\$67.15	\$32.82	\$44.51	\$17.9
CPT CODE		Mastectomy, partial	\$55.10	\$7.36	\$72.84	\$27.27	\$48.38	\$44.82	\$48.92	\$28.93	\$67.74	\$27.92	\$35.61	\$8.14
CPT CODE	19182	Mastectomy, subcutaneous	\$53.33	\$9.48	\$77.57	\$32.58	\$42.26	\$36.10	\$22.71	N.A.	\$63.57	\$32.15	\$57.88	\$46.13
APG#	53	OCCUPATIONAL THERAPY											11.0	ht 1
CPT CODE	97540	Training in activities of daily living (s	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	97541	Training in activities of daily living (s	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	54	PHYSICAL THERAPY					1							
CPT CODE	97010	Physical medicine treatment to one a	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Physical medicine treatment to one a	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	55	DIAGNOSTIC ARTHROSCOPY												
CPT CODE	29815	Arthroscopy, shoulder, diagnostic, wi	\$52.39	\$13.73	\$70.50	\$29.02	\$167.69	\$118.74	\$80.54	\$12.26	\$66.97	\$23.32	\$41.96	\$24.7
CPT CODE		Arthroscopy, knee, diagnostic, with	\$45.11	\$15.92	\$68.30	\$32.60	\$100.15	\$43.29	\$68.67	\$30.02	\$58.66	\$25.53	\$42.39	\$17.5
APG#	56	THERAPEUTIC ARTHROSCOPY												
CPT CODE	29877	Arthroscopy, knee, surgical debridem	\$55.98	\$14.88	\$78.50	\$27.07	\$113.55	\$60.41	\$77.00	\$36.20	\$67.18	\$30.35	\$70.65	\$58.1
CPT CODE	29881	Arthroscopy, knee, surgical with men	\$56.10	\$21.81	\$82.30	\$27.34	\$124.75	\$64.73	\$88.04	\$93.38	\$59.55	\$34.67	\$55.62	\$42.1
APG#	57	REPLACEMENT OF CAST												
CPT CODE	29075	Application elbow to finger (short ar	\$28.17	\$17.37	\$18.48	N.A.	\$22.70	\$30.47	\$68.97	\$15.22	\$20.67	N.A.	\$44.03	N.A.
CPT CODE		Application	\$27.46	\$20.94	\$2.31	N.A.	N.A.	N.A.	\$66.24	\$11.03	\$25.20	\$6.41	\$44.03	N.A.
APG#	58	SPLINT, STRAPPING & CAST REMOV	AL											-
CPT CODE	29125	Application of short arm splint (forea	\$26.41	\$19.56	\$18.48	N.A.	\$44.25	N.A.	\$44.50	\$40.35	\$45.83	\$45.01	\$44.03	N.A.
CPT CODE		Strapping unna boot	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A
APG#	59	TREATMENT OF CLOSED FRACTURE	& DISLO	CATION OF	FINGER, T	OE & RIS							1	
CPT CODE	21800	Treatment of rib fracture, closed, und	\$60.75	N.A.	\$12.05	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A
CPT CODE		Treatment of closed phalangeal shaft	\$21.80	\$17.63	\$13.56	\$15.00	\$23.43	\$29.44	\$2.81	N.A.	\$11,19	\$13.22	\$3.12	\$4.1
APG#	60	TREATMENT OF CLOSED FRACTURE	& DISLO	CATION EX	CEPT FING	ER, TOE &	RI8							-
CPT CODE	25600	Treatment of closed distal radial frac	\$35.21	\$19.28	\$42.41	\$34.94	\$35.07	\$12.98	\$84.62	\$37.14	\$29.51	\$23.60	\$41.39	\$10.9
CPT CODE		Treatment of closed distal radial frac		\$17.64	\$50.32	\$34.78	\$32.72	\$16.31	\$70.66	\$57.58	\$42.94	\$19.78	\$39.42	\$6.5
CPT CODE		Treatment of closed metatarsal fract	\$42.99	\$18.63	\$16.65	\$21.95	\$44.25	N.A.	\$17.74	N.A.	\$23.15	\$11.09	\$12.65	N.A
APG#	62	TREATMENT OF OPEN FRACTURE &	DISLOCA	TION EXCE	PT FACE									
CPT CODE		Treatment of open distal radial fractu	\$50.78	\$18.63	\$75.93	\$25.49	\$71.91	N.A.	N.A.	N.A.	\$52.42	\$19.66	\$64.65	N.A
CPT CODE		Open treatment of closed or open dis		\$15.37	\$78.24	\$17.38	\$30.32	\$39.78	\$32.14	N.A.	\$61.20	\$12.41	\$50.03	\$20.6
CPT CODE		Open treatment of closed or open ph		\$15.19	\$91.95	\$82.95	\$30.37	\$39.70	\$38.06	N.A.	\$47.04	\$34.14	\$50.00	\$20.7
APG#	63	JOINT MANIPULATION UNDER ANES												
CPT CODE		Manipulation under anesthesia, shoul		\$17.70	\$35.68	\$30.56	\$71.33	N.A.	\$32.15	\$22.05	\$54.72	\$25.11	\$41.87	\$6.2
CPT CODE	27570	Manipulation of knee joint under gen	\$34.09	\$15.73	\$42.31	\$24.68	\$49.92	\$21.85	\$108.56	N.A.	\$59.97	\$22.16	\$23.73	\$17.8
APG#	64	SIMPLE MAXILLOFACIAL PROCEDUR	ES											
CPT CODE		Drainage of hematoma, nasal, interna		\$21.21	\$37.38	\$16.43	\$72.09	N,A.	\$78.33	N.A.	\$54.45	\$0.15	\$41.50	\$8.3
CPT CODE		Excision, nasal polyp(s), simple unital		\$14.87	\$57.71	\$38.34	\$70.88	N.A.	\$74.24	N.A.	\$43.37	\$25.90	\$41.10	\$8.90
		Excision, nasal polyp(s), simple bilate		\$15.99	\$68.52	\$39.47	\$149,45	N.A.	\$111.09	N.A.	\$55.43	\$10.32	\$43.71	\$12.3
CPT CODE	30111	Excision, nasar polypts), simple bilate	.40.44	710.00	1 400.02		1				-			

	MEAN	AND STANDARD DEVIATION	FOR A	VESTHES	IA COST	S BY FAC	ILITY TY	PE AND V	OLUME	- SURGIC	AL PRO	CEDUNE	,	
								Anesthe	sia Costs			10:		
						spitals						S.C.s lume	Val	lume
				lume		lume		ume		ıme		)-5999)		00+1
			(1000	)-2999)	(3000	)-5999)	(600	00+)	(1000	2999)	(3000	Standard	1000	Standard
SURGICAL				Standard		Standard		Standard		Standard		Deviation	Mean	Deviation
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean		\$48.84	\$30.39
CPT CODE	31020	Sinusotomy, maxillary (antrotomy); i	\$44.95	\$8.65	\$64.62	\$18.29	\$68.73	\$1.68	\$63.04	\$15.56	\$66.14	\$22.26	948.04	\$30.35
APG#	65	COMPLEX MAXILLOFACIAL PROCED	URES									100.00	\$52.91	\$19.27
CPT CODE	30520	Septoplasty or submucous resection,	\$69.67	\$43.03	\$70.26	\$29.93	\$66.39	\$14.56	\$59.70	\$48.99	\$55.60	\$28.22	\$52.91	\$19.27
CPT CODE	30620	Reconstruction, functional, internal n	\$40.30	\$22.78	\$57.63	\$18.35	\$50.42	\$42.49	\$93.90	\$38.04	\$67.38	\$24.38	\$55.10	921.71
APG#	66	INCISION OF BONE, JOINT, & TENDO	N .								110.00	100 11	\$13.71	\$17.17
CPT CODE	25000	Tendon sheath incision at radial stylo	\$19.51	\$14.52	\$22.82	\$17.41	\$22.89	\$30.92	\$15.44	. \$9.59	\$18.86	\$20.14		\$17.17
CPT CODE	28270	Capsulotomy for contracture; metata	\$44.03	\$36.60	\$30.06	\$34.56	\$148.45	N.A.	\$21.86	\$4.04	\$17.71	\$16.23	\$18.30	\$11.00
APG#	67	BUNION PROCEDURES										100.00	15101	05457
CPT CODE		Hallux valgus (bunion) correction, wit	\$29.35	\$21.97	\$57.46	\$47.53	\$120.77	\$52.38	\$31.21	\$26.97	\$50.68	\$38.02	\$54.24	\$54.57
CPT CODE	28292	Hallux valgus (bunion) correction, wit	\$20.94	\$12.06	\$36.97	\$39.81	\$120.77	\$52.38	\$17.77	\$12.35	\$23.82	\$15.67	\$27.23	\$20.46
APG#	68	EXCISION OF SONE, JOINT & TENDO	N OF THE	HAND & F	OOT									100.01
CPT CODE		Excision or lesion of tendon sheath o	\$21.50	\$14.04	\$20.19	\$18.96	\$20.98	\$32.45	\$9.30	\$6.88	\$22.80	\$26.44	\$20.62	\$25.91
CPT CODE		Excision of interdigital (Morton) neur	\$46.02	\$13.97	\$48.48	\$33.77	\$111.50	\$52.26	\$45.53	\$37.49	\$58.40	\$31.91	\$24.83	\$7.72
APG#	69	EXCISION OF 80NE , JOINT & TEND	ON EXCER	T HAND &	FOOT									
CPT CODE		Excision, olecranon bursa	\$25.93	\$16.21	\$83.46	\$96.33	\$92.13	\$24.86	\$59.40	N.A.	\$46.92	\$28.39	\$43.92	\$9.09
CPT CODE		Excision of synovial cyst of popiteal	\$41.77	\$15.04	\$59.21	\$42.72	\$148.45	N.A.	\$27.54	\$6.05	\$59.29	\$36.02	\$45.75	\$16.43
APG#	70	ARTHROPLASTY										1		
CPT CODE		Interposition arthroplasty, intercarpal	\$40.44	\$28.31	\$45.02	\$47.92	\$30.37	\$39.70	\$23.27	N.A.	\$20.06	\$24.00	\$54.34	N.A.
CPT CODE	20447	Arthroplasty interphalangeal joint; sin		\$20.15	\$38.50	\$51.88	\$22.89	\$30.92	N.A.	N.A.	\$29.77	\$26.21	\$26.18	\$22.09
APG#	71	HAND & FOOT TENOTOMY												
	26455	Tenotomy, flexor, single, finger open	\$23.25	\$12.16	\$14.26	\$16.31	\$22.89	\$30.92	\$9.39	\$9.31	\$21,30	\$31.69	\$16.07	\$24.19
CPT CODE	20400	Tenotomy, open, extensor, foot or to	\$40.77	\$10.78	\$49.11	\$35.48	\$148.45	N.A.	\$101.41	N.A.	\$41,22	\$26.91	\$15.97	\$8.39
CPT CODE	72	SIMPLE HAND & FOOT REPAIR EXCE	PT TENO											1
APG#		Tendon sheath incision for trigger fin			\$21.75	\$15.37	\$14.67	\$9.08	\$6.33	\$3.88	\$25.20	\$29.65	\$14.14	\$21.13
CPT CODE	26055	Hammertoe operation, one tow (e.g.,	\$51.02	\$14.61	\$63.22	\$30.79	\$50.60	\$43.93	\$49.80	\$41.33	\$65.28	\$22.12	\$28.47	\$12.34
CPT CODE			V31.02	414101	100100	100			1				1	
APG#	73	COMPLEX HAND & FOOT REPAIR	640.79	\$18.09	\$79.21	\$33.53	\$68,81	\$14.66	\$57.67	\$29.49	\$71.55	\$27.64	\$33.15	\$28.21
CPT CODE	26860	Arthrodesis, interphalangeal joint; with	443.70 422.2E	\$17.50	\$54.40	\$38,44	\$109.18	\$55.53	\$74.06	N.A.	\$59.66	\$20.44	\$29.40	\$21.43
CPT CODE		Amputation, metatarsal, with toe, sir REPAIR, EXCEPT ARTHROTOMY, OF	900NE 1/											
APG#	74			\$20.30	\$88.06	\$36.51	\$67.53	N.A.	\$35.58	N.A.	\$72.77	\$20.12	\$71.18	N.A.
CPT CODE	23420	Repair of complete shoulder (rotator)	\$58.59	\$19.22	\$35.64	\$38.19	\$30.32	\$39.78	\$43.84	\$28.95	\$38.34	\$29.11	\$33.03	\$26.06
CPT CODE		Repair, tendon or muscle, flexor, fore	\$32.41	\$19.22	\$35.64	930.13	930.32	733.76	V43.04	420100	100101	1201.1	1	
APG#	75	ARTHROTOMY EXCEPT OF HAND &	FOOT	440.70	\$62.28	\$28,71	\$59.06	\$21.91	N.A.	N.A.	\$54.02	\$16.44	\$55,16	\$28.01
CPT CODE	27332	Arthrotomy, knee, for excision of se	\$49.71	\$12.78	\$68.48	\$27.97	\$43.83	N.A.	N.A.	N.A.	\$43.20	\$12.10	\$55,16	\$28.01
CPT CODE		Arthrotomy, knee, for excision of se	\$52.88	\$20.98	\$68.48	\$27.97	\$43.83	N.A.	14.74	14.0.	V40.20	V12.10	700110	120101
APG#	76	ARTHROCENTESIS & LIGAMENT OR		INJECTION		10.53	\$181.33	N.A.	\$59.26	\$66.68	\$7.03	\$5.75	\$20.62	N.A.
CPT CODE	20550	Injection, tendon sheath, ligament, tr	\$26.76	\$30.27	\$3.61	\$2.57	\$125.66	\$78.72	\$112.58	N.A.	\$41.73	\$23.26	\$22.11	\$31.00
CPT CODE	20605	Arthrocentesis, aspiration and/or inje	\$33.38	\$10.89	\$16.91	\$22.18				N.A.	\$47.78	\$20.33	\$27.25	\$23.72
CPT CODE	20610	Arthrocentesis, aspiration and/or inje	\$40.01	\$14.15	\$28.02	\$32.63	\$181.33	N.A.	N.A.	N.A.	447.70	720.33	V27.20	VE3.72
APG#	. 77	SPEECH THERAPY			1			A1 A	N. A.	AL A	N.A.	N.A.	N.A.	N.A.
CPT CODE		Speech, language or hearing therapy,		N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	92508	Speech, language or hearing therapy,	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	IV.A.	IV.A.	IV.A.
APG#	79	PULMONARY TEST & THERAPY EXC	EPT SPIR	OMETRY		1	-		1 11 4	A1 A	AL A	NI A	N.A.	N.A.
CPT CODE	94650	Intermittent positive pressure breathi	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.		N.A.
CPT CODE	94760	Noninvasive ear or pulse eximetry for	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	80	NEEDLE & CATHETER BIOPSY, ASPI	RATION,	LAVAGE &	INTU8ATIO	N								

Mean

N.A.

N.A.

\$29.16

\$29.16

\$53.69

(60000 + 1)

Standard

Deviation

ΝΔ

N.A.

\$2.76

\$2.76

\$26.37

\$43.25

ΝΔ

N.A

NΔ

NΔ

N.A.

N.A.

NΛ

ΝΔ

A.S.C.s

Volume

(3000-5999)

\$8 13 NΔ

\$46.74

\$40.07 \$12.25

\$66.39 \$20.31

Standard

\$13.88

NA.

N.A.

NΑ

NΔ

N.A.

NΔ

N.A.

N.A.

N.A.

\$21.56

\$30.75

N.A.

N.A.

ΝΔ

NΔ

NA.

N.A.

N.A.

N A

NA

N.A.

N.A.

ΝΔ

N.A.

N.A.

N.A.

MEAN AND STANDARD DEVIATION FOR ANESTHESIA COSTS BY FACILITY TYPE AND VOLUME - SURGICAL PROCEDURES

Hospitals

Volume

(3000-5999)

Deviation

\$24.53

\$30.59

\$36.30

\$27.89

Mean

\$4.30 \$1.90

\$29.65

\$30.45

\$44.86

Volume

(1000-2999)

Mean

APG AND CPT DESCRIPTION

32000 Thoracentesis, puncture or pleural ca \$6.70

32405 Biopsy, lung or mediastinum, percuta \$35.64

31505 Laryngoscopy, indirect (separate proc \$13.01

31510 Laryngoscopy, indirect (separate proc \$16.71

82 COMPLEX ENDOSCOPY OF THE UPPER AIRWAY

36489 Placement of central venous catheter \$14.30

110 DIAGNOSTIC CARDIAC CATHETERIZATION

93549 Combined right and left heart cathete N.A.

92982 Percutaneous transluminal coronary b N.A.

112 PACEMAKER INSERTION & REPLACEMENT

111 ANGIOPLASTY & TRANSCATHETER PROCEDURES

36860 Cannula declotting without balloon c

93547 Combined left heart catheterization.

75963 Percutaneous transluminal angioplast

81 SIMPLE ENDOSCOPY OF THE UPPER AIRWAY

Standard

Deviation

\$6.75

\$26.12

\$14.39

\$18.42

Anesthesia Costs

(1000,2999)

NA.

N A

\$25.17

\$25.17

\$78.12

N.A.

N.A.

N.A.

NΑ

МΔ

N A N A N.A.

N A N.A. N.A.

N.A. N.A. NΔ N.A.

NΔ N.A. N.A.

N.A. N.A. N.A.

Standard

Deviation

A IA

N.A. N.A. NΑ

N.A.

N.A

Volume (6000+)

Mean

NΔ

N.A.

\$58 57

\$58.57

\$40.82

Standard

NΔ

N.A.

59.62

\$9.62

\$27.69

SUBGICAL

CPT CODE

CPT CODE

CPT CODE

CPT CODE

CPT CODE

APG#

APG#

APG#

PROCEDURES

	MEAN	AND STANDARD DEVIATION	FOR A	NESTHES	IA COST	SBYFAC	ILITY TY			- SUNGIC	ME FRO	CEDONE		
								Anesthe	sia Costs					
						spitals						S.C.s	17-1	lume
			Vo	lume		ume		lume		ume		lume		
			(100)	0-2999)	(3000	-5999)	(60	00+)	(1000	-2999)	(300	0-5999)	(60)	00+)
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	22212	Insertion or replacement of pacemak	\$5.23	\$3.44	\$16.32	\$21.46	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE			\$14.44	\$22.41	\$18.10	\$23.02	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	113	REMOVAL & REVISION OF PACEMAK	ER & VA	SCULAR DE	VICE									
CPT CODE	22216	Insertion, replacement, or reposition	\$19.78	\$18.23	\$3.12	\$1.37	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	26407	Removal of implantable intravenous i	\$19.51	\$24.09	\$30.74	\$37.54	\$74.55	N.A.	\$29.44	N.A.	\$21.52	\$28.54	\$8.61	\$2.09
APG#	114	MINOR VASCULAR REPAIR & FISTUL	A CONST											
CPT CODE		Thrombectomy and/or repair of arteri	\$19.77	\$20.87	\$17.58	\$17,18	\$29.26	N.A.	N.A.	N.A.	\$14.00	N.A.	N.A.	N.A.
CPT CODE	30070	Insertion of implantable intravenous i	\$36.97	\$22.36	\$46.91	\$34,49	\$74.55	N.A.	N.A.	N.A.	\$68.21	\$20.63	\$19.48	\$12.23
	115	SECONDARY VARICOSE VEINS & VA	SCIII AR											
APG#			\$51.51	\$15.61	\$57.15	\$30.41	\$67.06	\$23.58	\$103.84	N.A.	\$76.54	\$26.01	\$24.63	\$20.78
CPT CODE		Unlisted procedure, vascular surgery	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	\$58.24	N.A.	N.A.	N.A.
CPT CODE	116	VASCULAR LIGATION			1									
APG#		Ligation, major artery (e.g., post-trau	\$57.20	\$9.70	\$58.18	\$22.68	\$61.05	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	37618	Interrupting, partial or complete, or f	\$28.65	\$17.57	\$43.34	\$24.83	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE				\$19.95	\$52.19	\$26.81	\$50.38	N.A.	\$73.23	\$48.61	\$70.55	\$18.08	\$37.91	\$9.88
CPT CODE		Ligation and division and complete st CARDIOPULMONARY RESUSCITATIO	N 0 INTI		VJE.15	720101	100.00		-					
APG#	117			\$15.02	\$41.83	N.A.	\$39.65	N.A.	N.A.	N.A.	\$49.80	N.A.	N.A.	N.A.
CPT CODE		Intubation, endotracheal, emergency		N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Cardiopulmonary resuscitation (e.g., i	N.A.	N.A.	N.A.	14.00	14.0.	141741	140.0					
APG#	131	CHEMOTHERAPY BY INFUSION	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy injection, intravenous,	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy injection, intravenous,		N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy inject, iv, complex, us	N.A.	N.A.	N.A.	N.A.	IN.M.	14.0.	14.70	14.711	1			
APG#	132	CHEMOTHERAPY EXCEPT BY INFUSI		N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy injection, intravenous,	N.A.	N.A.	N.A.	IV.A.	IN.A.	14.7.	14.75.	141741	1111111	7111		
APG#	133	TRANSFUSION & PHLE8OTOMY				N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Transfusion, blood or blood compone	N.A.	N.A.	N.A.		N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Push transfusion, blood, 2 years or u	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	14.0.	14.7.	14.63	14.751	1000
APG#	134	8LOOD & 8LOOD PRODUCT EXCHAN						N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Exchange transfusion, blood, other th		N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	36520	Therapeutic apheresis (plasma and/or	N.A.	N.A.	\$7.99	N.A.	N.A.	N.A.	N.A.	IV.A.	IV.M.	14.0.	14.7.	14.6
APG#	135	DEEP LYMPH STRUCTURE & THYROI			-	<b></b>		\$39,42	\$23,11	\$22.72	\$55,34	\$30.11	\$62.86	\$26.52
CPT CODE		Biopsy or excision of lymph node(s);	\$45.24	\$11.70	\$40.44	\$31.33	\$46.68		\$64.37	\$43.56	\$63.50		\$55.54	\$34.80
CPT CODE	38525	Biopsy or excision of lymph node(s);	\$42.43	\$15,18	\$57.15	\$38.53	\$42.09	\$32.93	\$04.37	\$43.50	903.50	\$20.02	V33.34	¥54.00
APG#	157	ALIMENTARY TESTS AND SIMPLE TO								N. A.	N. A	N.A.	N.A.	N.A.
CPT CODE		Esophageal motility study	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.		N.A.	N.A.
CPT CODE	91030	Esophagus, acid perfusion (8ernstein)	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	158	ESOPHAGEAL DILATION WITHOUT E	NDOSCO								1		111.00	\$13,46
CPT CODE	43450	Dilation of esophagus, by unguided s		\$3.47	\$43.96	\$46.33	\$70.56	\$59.25	N.A.	N.A.	\$6.70	N.A.	\$11.00	\$13.46
CPT CODE	43451	Dilation of esophagus, by unguided s	\$7.67	\$7.75	\$41.89	\$42.92	\$57.03	\$68.75	\$96.65	N.A.	\$69.70	N.A.	\$11.65	\$12.96
APG#	159	PERCUTANEOUS & OTHER SIMPLE OF	ASTROI	NTESTINAL	BIOPSY								11001	N.A.
CPT CODE	47000	Biopsy of liver, percutaneous needle	\$21.55	\$35.83	\$18.24	\$36.10	N.A.	N.A.	\$7.25	N.A.	N.A.	N.A.	\$10.04	
CPT CODE		Biopsy, abdominal or retroperitoneal	\$48.54	\$20.35	\$34.87	N.A.	\$1.37	N.A.	N.A.	N.A.	N.A.	N.A.	\$32.41	\$31.63
CPT CODE		Esophageal intubation and collection.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A. ı	N.A.
APG#	160	ANOSCOPY WITH BIOPSY & DIAGNO	STIC PR	OCTOSIGM	OIDOSCOP	Υ								-
CPT CODE	45300	Proctosigmoidoscopy diagnostic (sep	\$15.33	\$8.43	\$45.51	\$57.25	\$38.40	N.A.	N.A.	N.A.	\$34.27	\$28.67	N.A.	N.A.

	MEAN	AND STANDARD DEVIATION	FUR A	MESTINES	IA 0031	O DI TAC		Anesthe	ia Costs					
					11	a-itale		Anes (nes	na Costs		Δ 5	S.C.s		
			- 11			spitals	. Ve	lume	Vol	ume		lume	Vol	ume
				lume		lume		00 + )		-2999)		0-5999)		00+)
			(100	0-2999)	(3000	-5999)	(60	Standard	(1000	Standard	(500)	Standard		Standa
SURGICAL				Standard		Standard	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviati
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	N.A.	N.A.	\$14.66	\$16.64	\$24.72	\$32.38	\$13.60	\$10.1
CPT CODE		Sigmoidoscopy, flexible fiberoptic dia	\$8.75	\$4.71	\$18.00	N.A.	\$13.54	N.A.	N.A.	N.A.	\$9.81	\$0.86	\$9.43	\$5.05
CPT CODE	46610	Anoscopy for removal of polyp	\$25.23	\$26.25	\$41.83	N.A.	\$13.04	IV.A.	N.A.	14.75	40.01	10.00	10110	
APG#	161	PROCTOSIGMOIDOSCOPY WITH EXC	ISION OF	R BIOPSY		10.00	40.00	N. A	\$18.05	\$17.78	\$6.68	\$2.44	\$8.78	\$5.55
CPT CODE	45331	Sigmoidoscopy, flexible fiberoptic for	\$20.91	\$22.94	\$9.68	\$6.98	\$3.03	N.A.	\$17.74	N.A.	\$9.04	N.A.	\$10.32	\$5.38
CPT CODE	45333	Sigmoidoscopy, flexible fiberoptic for	\$25.65	\$26.33	\$5.11	N.A.	N.A.	N.A.	\$17.74	IV.A.	\$5.04	14.70	V10.02	70.00
APG#	162	DIAGNOSTIC UPPER GASTROINTEST	INAL END	OSCOPY					110.05	\$11.66	\$18.82	\$16.03	\$22.23	\$22.9
CPT CODE	43235	Upper GI endoscopy including esopha	\$16.33	\$10.47	\$9.09	\$7.75	\$16.50	\$14.00	\$19.05	\$13.64	\$20.00	\$24.43	\$20.86	\$20.1
CPT CODE	43239	Upper GI endoscopy incl. esophagus	\$17.03	\$7.03	\$12.55	\$8.34	\$18.84	\$10.69	\$16.66	\$13.64	\$20.00	\$24.43	\$20.00	720.1
APG#	163	THERAPEUTIC UPPER GASTROINTES	TINAL EN	IDOSCOPY					100.00	N. A	\$64.05	N.A.	\$28.89	\$21.5
CPT CODE	43245	Upper GI endoscopy including esopha	\$13.75	\$7.34	\$12.76	\$7.60	N.A.	N.A.	\$30.29	N.A.	\$59.23	N.A.	\$27.79	\$20.2
CPT CODE	43246	Upper GI endoscopy including esopha	\$16.69	\$9.85	\$11.92	\$8.87	N.A.	N.A.	N.A.	N.A.	+59.23	N.A.	421.13	920.2
APG#	164	DIAGNOSTIC LOWER GASTROINTES	TINAL EN	DOSCOPY				10.15	10.16	44.77	\$14.45	\$4.62	\$12.73	\$13.2
CPT CODE	45378	Colonoscopy, fiberoptic, beyond sple	\$18.14	\$17.94	\$8.77	\$6.74	\$7.38	\$6.10	\$6.44	\$1.77	\$14.45	\$4.62	\$8.64	\$8.5
CPT CODE	45380	Colonoscopy, fiberoptic, beyond sple	\$18.51	\$17.94	\$10.09	\$6.41	\$8.82	\$8.59	\$12.64	\$12.11	\$24.34	\$20.02	90.04	70.0
APG#	165	THERAPEUTIC LOWER GASTROINTE	STINAL E	NDOSCOPY				1		/	10105		\$10.95	\$8.6
CPT CODE	45383	Colonoscopy, fiberoptic, beyond sple	\$25.72	\$24.67	\$8.22	\$7.06	\$3.89	\$1.22	\$20.62	\$16.92	\$64.05	N.A.		\$8.8
CPT CODE	45385	Colonoscopy, fiberoptic, beyond sple	\$18.67	\$19.18	\$9.90	\$4.81	\$21.33	\$19.75	\$16.26	\$18.03	\$23.19	\$17.53	\$10.11	\$0.0
APG#	166	ERCP & OTHER MISC. GASTROINTES	TINAL E	NDOSCOPY	PROCEDUI	RES	1		1		<u> </u>			N.A
CPT CODE	43260	Endoscopic retrograde cholangiopan-	\$17.74	\$13.64	\$12.59	\$9.08	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A
CPT CODE		Small intestinal endoscopy beyond se		\$17.26	\$21.25	\$2.93	\$3.03	N.A.	N.A.	N.A.	\$10.41	N.A.	\$5.88	N.A
APG#	167	TONSIL & ADENOID PROCEDURES											10.00	4000
CPT CODE	42821	Tonsillectomy and adenoidectomy, a	\$60.21	\$15.81	\$70.19	\$32.26	\$90.18	\$9.82	\$58.89	\$33.66	\$59.32	\$23.12	\$54.77	\$22.9
CPT CODE		Tonsillectomy, primary or secondary	\$61.33	\$17.12	\$78.51	\$34.94	\$89.07	\$25.71	\$58.14	\$46.19	\$59.66	\$22.78	\$50.92	\$21.6
APG#	168	HERNIA & HYDROCELE PROCEDURE	3											100
CPT CODE		Repair inguinal hernia, age 5 or over	\$58.05	\$26.54	\$70.93	\$34.57	\$81.34	\$40.48	\$67.42	\$42.24	\$71.24	\$26.68	\$67.42	\$20.9
CPT CODE		Repair inguinal hernia, any age recurr	\$69.24	\$7.64	\$61.57	\$16.03	\$59.52	\$20.64	\$82.39	\$30.73	\$73.98	\$27.14	\$55.86	\$24.
APG#	169	SIMPLE HEMORRHOID PROCEDURES			1								1	-
CPT CODE		Excision of external hemorrhoid tags	\$23.65	\$18.73	\$57.34	\$63.87	\$13.18	\$0.50	\$87.15	\$49.19	\$56.06	\$33.47	\$32.07	\$12.
CPT CODE	46934	Description of Hemorrhoids, any met	\$27.71	\$30.24	\$37.20	\$58.35	\$13.18	\$0.50	\$27.00	N.A.	\$46.24	\$36.70	\$28.44	\$13.
APG#	170		ES EXCE	PT HEMORE	RHOID PRO	CEDURES							-	-
CPT CODE	45915	Removal of fecal impaction or foreign	\$22.66	\$17.20	\$20.22	\$18.90	N.A.	N.A.	N.A.	N.A.	\$64.05	N.A.	\$5.88	N.A
CPT CODE		Fissurectomy, with or without sphine		\$25.33	\$48.33	\$56.25	\$13.18	\$0.50	\$8.54	N.A.	\$44.58	\$31.06	\$31.20	\$11.
APG#	171	COMPLEX ANAL & RECTAL PROCED	URES											
CPT CODE		Excision of Rectal tumor, transanal a	\$27.82	\$24.78	\$70.46	\$72.23	\$77.01	N.A.	\$26.05	\$19.39	\$78.37	\$6.81	\$20.20	\$12.
CPT CODE	46255	Hemorrhoidectomy internal and exter	\$17.68		\$43.04	\$51.21	\$13.29	\$0.40	\$37.73	\$25.08	\$32.12	\$30.96	\$33.19	\$13.
APG#	172	PERITONEAL PROCEDURES & CHAN	GE OF IN		INAL TUS	E								
CPT CODE		Change of Gastrostomy Tube	\$34.87		\$50.63	\$83.76	\$9.04	N.A.	N.A.	N.A.	\$3.80	N.A.	\$20.72	\$29
CPT CODE		Peritoneocentesis, abdominal parace	\$1.57	\$1.53	\$22,40	\$42.47	\$33.37	\$45.25	N.A.	N.A.	N.A.	N.A.	\$0.60	N.
	173	MISC. DIGESTIVE PROCEDURES	1.107											
APG#		Percutaneous placement of gastrosto	\$17.38	\$11.59	\$12.72	\$9.52	N.A.	N.A.	\$58.44	N.A.	\$54.55	N.A.	\$4.41	N.A
CPT CODE	43/50	Insertion of intraperitoneal cannula or	\$40.07	\$11.65	\$74.96	\$15.31	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.
CPT CODE	49421	SIMPLE URINARY STUDIES & PROCE	DURES	1.1100	1	1								
APG#		Bladder instillation of anticarcinogeni	\$32.59	N.A.	\$2.94	\$0.14	\$47.62	\$30.16	N.A.	N.A.	\$58.25	N.A.	N.A. 1	N./
CPT CODE	51720	Bladder instillation of anticarcinogeni	\$9.04	N.A.	\$4.10	\$2.13	\$23.91	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A
CPT CODE	51725	Simple cystometrogram (CMG) (e.g., Simple uroflowmetry (UFR) (e.g., sto		N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A

	MEAN	AND STANDARD DEVIATION	FOR A	NESTHES	IA COST	SBYFAC	ILILY LY	PE AND Y	OLUME	- SUNGIC	AL Pho	OLDONLO		
								Anesthe	sia Costs					
						pitals						S.C.s	1/-1	lume
			Vo	lume		ume		lume		ume		lume		
			(100	0-2999)	(3000	-5999)	(60	00+)	(1000	-2999)	(3000	)-5999)	(600	00+)
SURGICAL	_			Standard		Standard		Standard		Standard		Standard		Standar
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviatio
CPT CODE	55700	Siopsy, prostate needle or punch sing	\$23.88	\$24.94	\$77.88	\$49.07	\$81.65	\$57.63	\$1.90	N.A.	\$51.92	\$31.12	\$62.20	\$5.64
CPT CODE	EE706	Bioney prostate incisional any appro-	\$30.71	\$19.43	\$37.22	\$32.90	\$61.66	N.A.	\$112.51	N.A.	\$45.19	\$25.87	\$34.77	N.A.
APG#	214	TRANSURETHRAL RESECTION OF PR	OSTATE	& OTHER P	ROSTATE P	ROCEDURE								
CPT CODE		Transurethral resection of bladder ne	\$9.09	\$5.64	\$32.54	\$55.95	\$33.72	\$29.30	\$11.26	N.A.	\$17.67	\$8.08	\$27.65	N.A.
CPT CODE		Transurethral resection or prostate, i	\$6.88	\$4.78	\$41.83	\$57.76	\$13.27	\$0.38	N.A.	N.A.	\$13.00	N.A.	N.A.	N.A.
APG#	236	PROCEDURES FOR PREGNANCY & N								1				
		Fetal non-stress test	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Initiation and/or supervision of intern	N.A.	N.A.	\$7.99	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	237	PROCEDURES FOR PREGNANCY & N												
APG#	237	Treatment of spontaneous abortion, f	433.46	\$12.82	\$29.49	\$19.17	\$62.74	\$3.73	\$50.24	\$39.56	\$32.39	\$18.22	\$30.72	\$15.49
CPT CODE	59801	Treatment of missed abortion, any tri	\$30.82	\$11.90	\$39.14	\$25.13	\$65.01	\$6.94	\$34.32	\$20.85	\$50.63	\$17.08	\$27.96	\$11.9
CPT CODE		THERAPEUTIC ABORTION	400.0E											
APG#	238	Legal (therapeutic ) abortion, by dilati	\$35.24	\$18.82	\$51.74	\$24.87	\$60.10	N.A.	\$19.64	\$10.95	\$43.71	\$27.48	\$21.15	N.A.
CPT CODE	59840	Legal (therapeutic) abortion, by dilati	625.84		\$40.32	\$12.07	\$60.10	N.A.	\$26.23	\$7.43	\$53.91	\$29.92	\$32.08	\$21.6
CPT CODE		FEMALE GENITAL ENDOSCOPY	₹30.04	331.70	V-10.02					- 7				
APG#	240	Laparoscopy for visualization of pelvi	647 1G	\$14.90	\$59.51	\$30.37	\$74.12	\$0.49	\$46,46	\$19.43	\$66.22	\$22.85	\$64.11	\$39.6
CPT CODE	58980	Laparoscopy for visualization of pelvi	052.03	\$19.68	\$75.14	\$26.96	\$74.12	\$0,49	\$52.24	\$30.37	\$77.48	\$15.53	\$68.12	\$47.1
CPT CODE			400,00	V13.00	470114	120.00								
APG#	241	COLPOSCOPY	A22 06	\$29.85	\$32.55	\$18.40	\$69.92	N.A.	\$75.44	\$59.04	\$44.70	\$30.06	\$42.51	\$14.0
CPT CODE	57452	Colposcopy (vaginoscopy); (separate	\$32.00	\$24.99	\$40.17	\$30.92	\$53.13	\$23.75	\$117.26	N.A.	\$58.55	\$29.78	\$52.47	N.A.
CPT CODE	57454	Colposcopy (vaginoscopy); with biop	\$30.20		940.17	V50.52	400110	120112						
APG#	242	MISC. FEMALE REPRODUCTIVE PRO	ADD EA	\$15,48	\$43.40	\$30.41	\$56.43	\$19.08	\$85.43	\$38.49	\$47,21	\$30.05	\$40.75	\$11.7
CPT CODE	56600	Biopsy of vulva (separate procedure)	\$38.54	\$13.73	\$54.88	\$40.65	\$56.43	\$26.61	\$40,44	\$28.46	\$55.45	\$22.02	\$36.83	\$9.74
CPT CODE	57520	Biopsy of cervix, circumferential (con	\$34.60	\$13.73	434.00	040.00	400140	120.01						
APG#	243	DILATION & CURETTAGE	A 4 D 2 O	\$21,47	\$67.10	\$41.07	\$96.20	\$35.02	N.A.	N.A.	\$41.51	N.A.	\$42.79	\$11.2
CPT CODE	57820	Dilation and curettage of cervical stu	\$48.20	\$12.48	\$74.96	\$43.64	\$87.88	\$57.68	\$61.89	\$52.94	\$61.27	\$24.04	\$49.74	\$18.6
CPT CODE		Dilation and curettage, diagnostic an		\$12.48	\$74.90	\$43.04	707.00	737.00	401100	10210	121121			
APG#	244	FEMALE GENITAL EXCISION & REPA		\$15.98	\$60.28	\$48.51	\$64.51	\$7,64	\$20.53	N.A.	\$68.82	\$27.27	\$61.45	\$41.4
CPT CODE		Vulvectomy; partial, unilateral or bilat	\$44.50	\$15.88	\$46.63	\$31.91	\$90.74	\$29.45	\$66.27	\$11.02	\$56.02	\$30.79	\$41.24	\$9.84
CPT CODE		Excision of vaginal cyst or tumor	\$38.06	\$15.88	\$40.03	931.31	750.74	923.40	400127	111102	100.00		1	
APG#	261	ELECTROENCEPHALOGRAM			N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A
CPT CODE		Electroencephalogram (EEG) includin	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A
CPT CODE	95828	Polysomnography (recording, analysis	N.A.	N.A.	N.A.	N.A.	14.A.	14.7.	141631	140.0	11		1	1
APG#		ELECTROCONVULSIVE THERAPY			N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A
CPT CODE :		Electroconvulsive therapy (includes n		N.A.			N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A
CPT CODE		Electroconvulsive therapy (includes n	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	14.A.	14.7.	14.71	INITAL	1400.00	-
APG#	263	NERVE & MUSCLE TESTS					N. A	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A
CPT CODE		Nerve conduction, velocity and/or lat		N.A.	N.A.	N.A.	N.A.			N.A.	N.A.	N.A.	N.A.	N.A
CPT CODE		Nerve conduction, velocity and/or lat	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	14.A.		1.00	1000
APG#	264	INJECTION OF SUBSTANCE INTO SE		RD	100.00		40.50	N.A.	\$5.70	N.A.	\$13.70	\$2.26	\$16.71	\$3.7
CPT CODE		Injection of anesthetic substance (inc		\$9.04	\$55.47	N.A.	\$0.50	N.A.	\$18.81	\$22.45	\$6.86	\$7.36	\$0.60	N.A
CPT CODE	62289	Injection of substance other than ane	N.A.	N.A.	\$0.15	N.A.	N.A.	N.A.	18.81	922.45	40.00	47.36	70.00	14.7
APG#	265	SUBDURAL & SUBARACHNOID TAP							N. A.	AL A	N A	N.A	N.A.	N.A
CPT CODE		Replacement or irrigation, ventricular	N.A.	N.A.	N.A.	N.A.	\$1.14	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A
CPT CODE		Replacement, irrigation or revision of	N.A.	N.A.	\$55.36	N.A.	\$49.75	N.A.	N.A.	N.A.	N.A.	N.A.	IV.A.	14.A.
APG#		NERVE INJECTION & STIMULATION								1				

NΔ

\$17.03

66830 Removal of secondary membraneous \$20.31

\$20.72

\$30.81

ΝΔ

\$34.09

N.A. N.A.

MEAN AND STANDARD DEVIATION FOR ANESTHESIA COSTS BY FACILITY TYPE AND VOLUME - SURGICAL PROCEDURES

CPT CODE

	IVICA	N AND STANDARD DEVIATI	014 1 011 1					Total Direct	Costs					
					Hos	pitals		TOTAL DIEGO	. 00010		A.S	.C.s		
			Volu			ume	Volu	ıme	Vol	ıme	Vol	ume	Vol	ume
			(1000-			-5999)	1600		(1000		(3000	5999)	(600	00+)
			(1000-	Standard	(3000	Standard	(000	Standard	(1000	Standard		Standard		Standa
SURGICAL				Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviat
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	iviean	Deviation	Ivicali	Dovidtion	Moun					
APG#	2	SUPERFICIAL NEEDLE BIOPSY & A		1440.05	\$103.00	\$31.55	\$95.99	\$3.81	\$188.05	N.A.	\$102.02	\$66.28	\$45.03	N.A
CPT CODE		Puncture Aspiration of Cyst of Bre	\$147.12	\$112.25		\$180.51	\$263.35	N.A.	\$191.89	N.A.	\$169.64	\$87.38	\$176.27	\$175
CPT CODE	19100	Biopsy of breast, needle (separate	N.A.	N.A.	\$272.45	\$180.51 N.A.	\$269.12	N.A.	N.A.	N.A.	N.A.	N.A.	\$398.20	N.A
CPT CODE	60100	Biopsy, thyroid, percutaneous nee	N.A.	N.A.	\$161.26	N.A.	\$269.12	N.A.	N.A.	14.74.	IV.A.	14,00	TODOLEO	
APG#	3	SIMPLE INCISION & DRAINAGE					1100 70	\$65,42	\$296.35	· N.A.	\$218.53	\$81.89	\$213.70	\$82.
CPT CODE		Incision and drainage of infected o	\$249.74	\$71.31	\$192.78	\$61.26	\$198.70		\$295.16	\$114.88	\$175.91	\$53.50	\$201.06	\$83.
CPT CODE	10060	Incision and drainage of abscess (	\$262.10	\$67.10	\$207.67	\$57.73	\$264.69	\$1.62		\$92.53	\$200.78	\$51.98	\$271.97	\$32.
CPT CODE	10120	Incision & removal of foreign body	\$264.83	\$66.01	\$234.20	\$30.87	\$173.94	\$89.43	\$232.03	992.53	\$200.76	401.50	\$271.37	VUL.
APG#	4	COMPLEX INCISION AND DRAINA	GE	1				1			1070 70	\$43.72	\$304.34	\$47.
CPT CODE	10141	Incision and drainage of hematom	\$310.96	\$64.08	\$285.35	\$73.08	\$327.80	N.A.	\$245.53	\$42.27	\$270.70	\$68.17	\$316.29	N./
CPT CODE		Incision and drainage, complex, po	\$331.34	\$83.51	\$346.39	\$120.02	\$299.42	\$26.69	\$304.44	N.A.	\$249.42		\$299.28	N.A
CPT CODE		Incision and drainage, upper arm o	\$269.87	\$45.73	\$321.67	\$114.48	\$274.23	\$0.66	\$371.52	N.A.	\$267.86	\$77.14		N.A
CPT CODE		Deep dissection below fascia, for	\$339.63	\$132.83	\$303.00	\$61.53	\$390.76	N.A.	N.A.	N.A.	\$290.78	\$46.43	\$176.61	IN.
APG#	5	COMPLEX INCISION AND DRAINA	GE											107
CPT CODE		Debridement of nails, manual; five		\$55.55	\$124.43	\$30.55	\$191.39	\$57.17	\$189.87	N.A:	\$170.86	\$23.66	\$173.75	\$27.
CPT CODE		Debridement of nails, manual each		\$46.44	\$145.72	\$45.32	\$191.01	\$56.63	\$173.90	N.A.	\$183.83	\$20.57	\$185.00	\$47.
APG#	6	SIMPLE DEBRIDEMENT & DESTRU	CTION										1	
		Debridement of skin, partial thickn		\$59.33	\$225.67	\$47.03	\$259.17	N.A.	\$281.09	N.A.	\$239.46	\$48.51	\$259.65	\$62.
CPT CODE		Avulstion of nail plate, partial or c	\$222.59	\$48.25	\$157.46	\$45.86	\$186.35	\$63.23	\$312.04	N.A.	\$178.02	\$86.72	\$198.09	\$74.
CPT CODE		Destruction by any method, with	\$174.02	\$30.73	\$195.58	\$27,91	\$171.03	\$54.28	\$177.45	N.A.	\$191.91	\$42.43	\$184.25	\$77.
CPT CODE		Removal of implant superficial, (e.	\$347.10	\$112.48	\$301.89	\$83.88	\$282.98	\$47.41	\$274.81	\$103.63	\$258.81	\$61.89	\$310.20	\$35.
CPT CODE	7	SIMPLE EXCISION & BIOPSY	V347.10	7112110	100									
APG#		Excision, benign lesion, except ski	\$218.75	\$32.54	\$209.22	\$56.06	\$185.82	\$76.24	\$205.85	\$94.83	\$248.44	\$42.01	\$222.01	\$61
CPT CODE			\$239.19	\$66.30	\$197.53	\$49.78	\$183.25	\$98.10	\$180.05	\$91.37	\$198.83	\$55.81	\$224.91	\$52
CPT CODE		Excision, other benign lesion (unle	\$220.83	\$76.01	\$219.61	\$57.26	\$222.01	\$51.16	\$333.24	N.A.	\$210.44	\$54.99	\$233.45	\$41
CPT CODE		Excision, malignant lesion; trunk,	\$220.03	\$70.09	\$240.28	\$91,49	\$238.08	\$37,63	\$273.65	\$93.28	\$237.38	\$42.11	\$266.14	\$37.
CPT CODE		Excision, malignant lesion, face, e			V2-40.20	7011.40	7200.01	1						
APG#	- 8	COMPLEX EXCISION, BIOPSY & D		\$18.76	\$213.62	\$61.70	\$225.33	\$87.72	\$213.42	\$99.20	\$231,67	\$36.94	\$230.14	\$41
CPT CODE		Excision, benign lesion, except ski		\$17.98	\$209.65	\$56.34	\$224.75	\$63.80	\$215.41	\$100.08	\$245.56	\$51.71	\$233.09	\$61
CPT CODE		Excision, benign lesion, except ski		\$74.84	\$209.85	\$63.19	\$226.83	\$31.57	\$256.21	\$67.51	\$218.72	\$55.76	\$277.02	\$37
CPT CODE	11643	Excision, malignant, lesion, face,	\$216.91		\$235.39	903.19	\$220.03	V31.07	V2.00.21	+07101	72.10112	10000		_
APG#	9	LIPECTOMY & EXCISION WITH RE	CONSTRUC	TION	4004 74	\$147.49	\$336.04	N.A.	\$382.66	N.A.	\$352.71	\$77.50	N.A.	N.
CPT CODE		Excision, excessive skin and subc	\$302.09	\$62.45	\$334.71		\$355.65	N.A.	N.A.	N.A.	\$348.44	\$15.13	\$399.29	N.
CPT CODE	15972	Excision, leg pressure ulcer, with I	\$348.62	\$59.30	\$352.00	\$101.80		N.A.	N.A.	N.A.	\$468.32	\$26.41	\$497.11	N.
CPT CODE .	37735	Ligation and division and completi	\$427.41	\$94.93	\$420.19	\$80.50	N.A.	N.A.	N.A.	14.75	V400.32	420.41	+407111	1
APG#	10	SIMPLE SKIN REPAIR						\$69.75	\$250.47	\$129.01	\$226.16	\$40.76	\$152.16	N.
CPT CODE	12001	Simple repair of superficial wound	\$252.61	\$60.71	\$199.61	\$51.22	\$137.42		\$183.58	\$4.29	\$246.35	\$67.92	\$161.32	
CPT CODE	12002	Simple repair of superficial wound	\$202.70	\$80.98	\$212.09	\$45.50	\$146.13	\$78.46			\$240.39	\$59.86	\$185.06	N
CPT CODE	12031	Layer closure of wounds of scalp	\$198.66	\$85.77	\$234.70	\$69.89	\$293.47	N.A.	\$214.35	\$11.91	\$240.39	959.60	9185.00	- 14
APG#	1 11	COMPLEX SKIN REPAIR						-			\$233,78	\$29.68	\$173.90	N
CPT CODE	12015	Simple repair or superficial wound	\$259.42	\$41.90	\$183.19	\$61.45	\$189.39	\$141.28	\$341.01	N.A.			\$258.14	N
CPT CODE		Simple repair or superficial wound	\$170.61	\$49.81	\$198.29	\$94.56	\$226.81	\$187.36	\$349.26	N.A.	\$261.41	\$40.42		N
CPT CODE		Layer closure of wounds of face.	\$276.54	\$112.11	\$226.53	\$105.52	\$334.61	N.A.	N.A.	N.A.	\$271.16	\$58.95	\$210.95	
CP1 CODE		Blopharoplasty, upper cyclid	\$186.42	\$36.68	\$272.90	\$80.81	\$249.85	N.A.	\$261.65	\$116.97	\$224.38	\$68.47	\$280.27	852
APG#	12	SKIN & INTEGUMENT GRAFT, TR.	ANSFER & F	EARRANGE	MENT									-
CPT CODE	144000	Adjacent tissue transfer or rearran	\$332.24	\$77.81	\$341.10	\$57.48	\$374.27	N.A.	\$385.01	\$5.46	\$296.66	\$59.51	\$329.58	\$50

	MEA	N AND STANDARD DEVIAT	ON FOR I	OTAL DI	RECT CO	SISBIF	ACILITY	Total Direc		- SUNGI	CAL FAC	CEDONE		
		1						Total Direc	t Costs		۸.	.C.s		
						pitals							1/-	lume
			Volu			lume	Volu			ume		lume		00 + )
			(1000-		(3000	-5999)	(600		(1000	-2999)	(3000	-5999)	(60)	
SURGICAL	-			Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES	1	APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	15100	Split graft, trunk, scalp, arms, leg	\$402.83	\$68.19	\$405.53	\$102.96	\$450.01	\$8.32	\$325.18	\$89.27	\$395.61	\$104.39	\$386.29	\$56.39
CPT CODE	15260	Full thickness graft, free, including		\$73.30	\$367.88	\$70.33	\$363.32	\$19.90	\$383.57	N.A.	\$350.73	\$60.04	\$423.30	\$34.75
APG#	27	SIMPLE INCISION & EXCISION OF	8REAST											
CPT CODE	19101	Biopsy of breast, incisional	\$323.04	\$85.95	\$303.75	\$62.38	\$295.66	\$68.16	\$320.82	\$87.15	\$271.96	\$40.61	\$300.02	\$56.33
CPT CODE	19120	Excision or cyst, fibroadenoma, or	\$264.70	\$49.91	\$281.22	\$46.78	\$270.88	\$54.91	\$237.63	\$66.35	\$272.17	\$32.25	\$275.66	\$88.60
APG#	28	BREAST RECONSTRUCTION & MA	STECTOMY											
CPT CODE	19140	Mastectomy for gynecomastia thr	\$358.76	\$69.66	\$367.87	\$146.56	\$286.10	\$51.70	\$317.00	\$98.27	\$298.66	\$43.38	\$313.75	\$17.44
CPT CODE	19160	Mastectomy, partial	\$376.25	\$123.25	\$385.18	\$133.35	\$357.98	\$89.24	\$242.12	\$1.49	\$338.27	\$59.22	\$368.57	\$99.06
CPT CODE		Mastectomy, subcutaneous	\$360.54	\$76.54	\$373.95	\$128.06	\$327.22	\$54.61	\$248.18	N.A.	\$342.17	\$44.97	\$346.22	\$41.58
APG#	53	OCCUPATIONAL THERAPY				1								
CPT CODE		Training in activities of daily living	\$33.11	\$25.21	\$45.06	\$22.24	\$36.88	\$24.69	N.A.	N.A.	N.A.	N.A.	N.A,	N.A.
CPT CODE	97541	Training in activities of daily living	\$39.79	N.A.	N.A.	N.A.	\$16.32	\$8.93	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	54	PHYSICAL THERAPY												
CPT CODE	97010	Physical medicine treatment to on	\$31.86	N.A.	\$24.92	N.A.	\$27.01	\$10.42	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Physical medicine treatment to on	\$36.30	N.A.	\$21,15	N.A.	\$27.64	\$9.97	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	55	DIAGNOSTIC ARTHROSCOPY										-		
CPT CODE		Arthroscopy, shoulder, diagnostic,	\$402,18	\$112.31	\$462.49	\$127.85	\$675.26	\$26.06	\$423.65	\$49.07	\$383.92	\$70.21	\$438.89	\$116.38
CPT CODE		Arthroscopy, knee, diagnostic, wit	\$370.25	\$78.88	\$454.31	\$130.09	\$519.05	\$103.24	\$392.21	\$80.57	\$394.52	\$86.36	\$461.52	\$54.99
APG#	56	THERAPEUTIC ARTHROSCOPY												
CPT CODE		Arthroscopy, knee, surgical debrid	\$394.51	\$61.27	\$526.32	\$122.24	\$583.54	\$107.66	\$518.10	\$42.09	\$419.51	\$47.99	\$559.41	\$155.16
CPT CODE		Arthroscopy, knee, surgical with	\$397.95	\$85.69	\$559.99	\$147.41	\$667.11	\$173.29	\$434.27	\$86.79	\$422.01	\$78.20	\$499.67	\$106.43
APG#	57	REPLACEMENT OF CAST												
CPT CODE		Application elbow to finger (short	\$177.98	\$81.74	\$102.44	\$82.99	\$233.50	\$178.03	\$239.21	\$84.03	\$213.84	N.A.	\$118.48	\$51.34
CPT CODE		Application	\$179.72	\$86.13	\$268.36	\$240.54	N.A.	N.A.	\$233.87	\$76.32	\$161.92	\$73.16	\$174.86	N.A.
APG#	58	SPLINT, STRAPPING & CAST REM												
CPT CODE		Application of short arm splint (for		\$79.59	\$152.66	\$134.90	\$123,35	\$68.29	\$195.91	\$135.80	\$204.67	\$14.40	\$123.08	\$66.30
CPT CODE		Strapping unna boot	\$42.13	N.A.	\$39.41	N.A.	\$26.90	N.A.	\$47.71	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	59	TREATMENT OF CLOSED FRACTU												
CPT CODE		Treatment of rib fracture, closed,	\$111.20	\$92.15	\$60.16	\$60.06	\$18.86	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Treatment of closed phalangeal sh		\$65.90	\$147.99	\$79.24	\$106.00	\$92.82	\$121,42	N.A.	\$183.98	\$37.64	\$108.30	\$28.57
APG#	60	TREATMENT OF CLOSED FRACTU					18							
CPT CODE		Treatment of closed distel radial fr		\$81.53	\$209.46	\$61.68	\$184.75	\$17.06	\$253.47	\$101.94	\$252.32	\$47.52	\$220.27	\$39.59
CPT CODE		Treatment of closed distal radial fr	\$253.10	\$70.97	\$243.95	\$62.31	\$181,47	\$12,42	\$270.77	\$92.98	\$232.14	\$18.63	\$198.18	\$38.33
		Treatment of closed distal radial if	\$161.04	\$69.06	\$180.30	\$69.56	\$128.57	\$60.91	\$295.14	N.A.	\$142.19	\$14.54	\$116.59	\$67,10
CPT CODE	62	TREATMENT OF OPEN FRACTURE				700.00	*120107	100101			1			
APG#		Treatment of open distal radial fra	\$407.26	\$106.77	\$425.09	\$87.36	\$319.39	N.A.	N.A.	N.A.	\$387.06	\$41.22	\$337.72	N.A.
CPT CODE		Open treatment of closed or open	\$411.18	\$91.11	\$419.71	\$62.35	\$250.22	\$44.52	\$344.65	N.A.	\$368.62	\$82.20	\$383.23	\$48.60
CPT CODE			\$374.81	\$92.98	\$405.89	\$123,45	\$216.45	\$89.94	\$321.19	N.A.	\$362.45	\$71.81	\$295.33	\$6.21
CPT CODE	26735	JOINT MANIPULATION UNDER AN		432.30	+400.00	V120.40	7210.75	700.04	.02.1110	1117.11		1,		
APG#		Manipulation under anesthesia, sh		\$62.51	\$177.84	\$18.39	\$244.55	N.A.	\$148.76	\$48.98	\$231.73	\$62.55	\$245.61	\$67.24
CPT CODE				\$57.43	\$158.27	\$43.64	\$198.59	\$101.75	\$351.18	N.A.	\$246.69	\$74.11	\$195.02	\$27.83
CPT CODE		Manipulation of knee joint under g SIMPLE MAXILLOFACIAL PROCED		V37.43	V130.27	7-3.04	V.50.00	7.01.75	+501.10	1	12 70.00		1	1
APG#	64			\$77.37	\$247.26	\$72.73	\$287.86	N.A.	\$361.28	N.A.	\$275.62	\$16,64	\$259.88	\$4,43
CPT CODE		Drainage of hematoma, nasal, inte		\$81.35	\$247.26	\$88.45	\$283.71	N.A.	\$297.82	N.A.	\$268.47	\$64.36	\$237.93	\$11.63
CPT CODE		Excision, nasal polyp(s), simple un		\$81.35	\$283.99	\$100.11	\$353.43	N.A.	\$388.77	N.A.	\$291.27	\$76.26	\$256.05	\$37.73
CPT CODE	30111	Excision, nasal polyp(s), simple bil	9315.01	902.94	9300.08	1 000.11	4303.43	14.74.	1 4000.77	14.A.	14501.27	1 7, 3.20	1 +200.00	1

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APG#

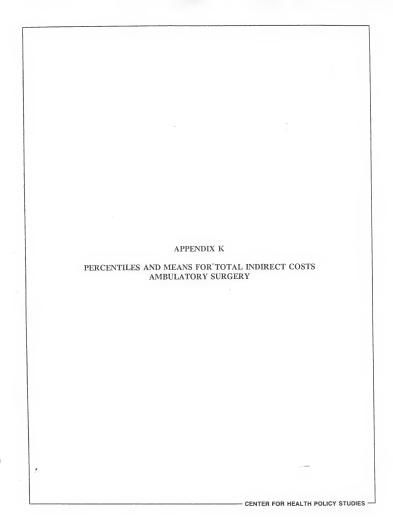
	WEA	N AND STANDARD DEVIATI	ON FOR I	OTAL DI	LCT CO.	010 01 11	AOILIT I	Total Direc		. 001101	0/12 1 110	OLD OTTE		
					Hose	pitals		TOTAL DIFEC	COSIS		Δ	.C.s		
			Volu			ume	Volu	ma	Vol	uma		ume	Vol	ume
			(1000-			-59991	(600		(1000			-5999)		20+1
			(1000-	Standard	13000	Standard	1000	Standard	11000	Standard	10000	Standard		Standard
SURGICAL			Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviatio
PROCEDURES		APG AND CPT DESCRIPTION COMPLEX ANTERIOR SEGMENT E					ivicali	Deviation	1410 011	Deviation	Modifi	Deviation	1110011	00110110
APG#			N.A.	N.A.	\$160.10	N.A.	\$169.32	N.A.	\$410.87	\$69.91	\$444.34	\$261.62	\$743.83	\$444.96
CPT CODE		Keratoplasty, penetrating, include		\$69.93	\$403.95	\$108.00	\$150.68	N.A.	\$332.10	\$220.38	\$329.40	\$118.16	\$313.21	\$20.72
CPT CODE		Removal of vitreous, anterior appr	\$367.29		\$403.95	\$108.00	\$150.00	IV.A.	V332.10	V220.30	V323.40	V110.10	V010.21	720172
APG#		SIMPLE POSTERIOR SEGMENT EYE			\$357.38	\$168.50	\$95.79	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Destruction of localized lesion of r	N.A.	N.A.	\$476.53	N.A.	\$105.55	N.A.	\$44.82	N.A.	\$186.89	N.A.	N.A.	N.A.
CPT CODE		Destruction of extensive or progre	N.A.		\$470.53	N.A.	\$105.55	IN.A.	944.02	14.0.	\$100.00	14.75	14.75	141741
APG#		COMPLEX POSTERIOR SEGMENT		URES	\$432,66	\$160.59	N.A.	N.A.	\$390.87	\$257.87	\$402.84	\$138.76	\$412.42	\$158.48
CPT CODE		Vitrectomy, mechanical, pars plan		\$339.51	\$432.66	N.A.	\$360.66	N.A.	\$125.26	N.A.	\$239.19	N.A.	\$900,49	N.A.
CPT CODE		Repair of retinal detachment, one	\$581.82	N.A.	\$476.53	N.A.	\$360.66	IV.A.	9125.20	14.0.	V233.13	14.73.	V300.43	14174
APG#		STRABISMUS & MUSCLE EYE PRO		100.10	\$374.15	\$80.53	\$269.71	N.A.	\$192.94	\$75.95	\$290.19	\$63.12	\$278.62	\$79.49
CPT CODE		Strabismus surgery on patient not	\$297.55	\$83.19	\$374.15	\$67.93	\$275.71	N.A.	\$236.45	\$82.16	\$293.48	\$56.47	\$234.99	\$27.12
CPT CODE		Strabismus surgery on patient not	\$273.78	\$37.53	\$353.05	907.93	92/5./1	14.4.	7230.45	V02.10	V233.40	¥30.47	VE04.00	727112
APG#		SIMPLE REPAIR & PLASTIC PROCE		\$19.08	\$262.82	\$58.34	\$237.57	N.A.	\$162.16	\$65.09	\$169,40	\$59.89	\$189.43	\$43.52
CPT CODE		Excision of lesion of eye lid witho	\$264.29	\$67.61	\$262.82	\$63.11	\$237.57	N.A.	\$183.81	\$92.09	\$217.61	\$70.24	\$234.45	\$48.87
CPT CODE	67921	Repair of entropion suture  COMPLEX REPAIR & PLASTIC PRO	\$237.21		\$249.56	\$63.11	\$237.57	IV.A.	9103.01	952.05	9217.01	¥70.24	7234,43	V40.07
APG#				\$64.61	\$283.45	\$45.22	\$274.97	\$26.39	\$254.93	\$139.21	\$209.49	\$88.75	\$222.54	\$65.36
CPT CODE		Repair of blepharoptosis (tarso)-le	\$242.44		\$537.90	\$136.79	\$343.45	\$11.03	\$373.83	\$98.26	\$337.30	\$104.79	\$335.98	\$15.25
CPT CODE		Dacryocystorhinostomy (fistulizati	\$485.80	\$53.08	9537.50	\$130.73	\$343.45	V11.05	V373.00	¥50.20	4007.00	7101.70	1000100	
APG#		OTORHINOLARYNGOLOGIC FUNC		N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Oscillating tracking test, with reco		N.A.	\$50.76	N.A.	\$110.39	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Brainstem evoked response record		N.A.	\$50.76	N.A.	\$110.39	IN.A.	IV.M.	N.A.	14.74.	13.73.	14.0.	14.75
APG#	314	MAJOR EXTERNAL EAR PROCEDU	\$276.63	\$75.53	\$353.41	\$71.23	\$334.83	\$31.73	\$366.82	N.A.	\$266.38	N.A.	\$397.99	N.A.
CPT CODE		Excision exostosis (es), external a		\$79.78	\$448.92	\$55.42	\$356.98	N.A.	N.A.	N.A.	\$356.97	N.A.	\$387.44	N.A.
CPT CODE		Reconstruction of external auditor TYMPANOSTOMY & OTHER SIMP	\$259.01			900.42	\$300.30	N.A.	14.M.	IV.A.	4300.37	18.0	V307.44	14.71
APG#				\$63.36	\$235.92	\$62.63	\$218,73	\$56.27	\$215.90	\$75.78	\$233.81	\$67.81	\$169.43	\$30.00
CPT CODE		Myringotomy including aspiration	\$199.49			N.A.	\$209.24	\$85.21	\$187.68	\$86.71	\$217.10	\$25.38	\$130.33	\$30.01
CPT CODE		Tympanostomy (requiring insertion	\$170.62	\$53.56	\$147.33	N.A.	\$209.24	900.21	9107.00	900.71	\$217.10	920.36	V130.33	V30.01
APG#	316	TYMPANOPLASTY & OTHER COM		\$78.27	\$398.24	\$42.80	\$419.77	\$7.54	\$257.55	\$99.65	\$325.72	\$12.84	\$370.64	\$64.00
CPT CODE		Tympanoplasty w/o mastoidectom					\$389.79	\$49.94	N.A.	N.A.	\$454.05	N.A.	\$429.89	\$91.76
CPT CODE		Stapedectomy with re-establishme	\$366.68	\$46.09	\$515.24	\$148.59	\$389.79	\$49.94	N.A.	N.A.	\$454.05	N.A.	9423.03	V31.70
APG#	317	INNER EAR PROCEDURES	1005 51		4004.00	NI A	6200 14	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Endolymphatic sac operation; with		N.A.	\$364.62	N.A.	\$299.14	N.A.	N.A.	N.A.	\$246.57	N.A.	N.A.	N.A.
CPT CODE		Revision fenestration operation	N.A.	N.A.	N.A.	N.A.	\$286.84	N.A.	N.A.	N.A.	9240.37	N.A.	IN.A.	14.7
APG#	318	SIMPLE AUDIOMETRY	100.05	444.00	400 70	410.00	N. A	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Basic comprehensive audiometry	\$62.85	\$11.68	\$36.72	\$10.62	N.A.		N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Tympanometry	\$11.31	N.A.	\$10.69	\$6.77	N.A.	N.A.	N.A.	IV.A.	IV.A.	IV.A.	IV.A.	N.A.
APG#		REMOVAL OF IMPACTED CERUME						475.47	4070.00		\$161.31	\$34.65	\$121.19	\$40.8
CPT CODE		Removal impacted cerumen (separ	\$143.78	\$38.16	\$25.28	N.A.	\$207.92	\$75.17	\$273.86	N.A.	\$101.31	934.65	9121.19	940.8
ACCOPPOSTE MEAN	LEOR ALL S	URGICAL PROCEDURES								1		1		\$61.8

-								Total Direc	t Costs				*****	
					Hos	pitals			T		A.5	S.C.s		
			Vol	ume	Vo	lume	Vol	ume	Vo	lume		lume	Vo	lume
			(1000	-2999)		)-5999)		00+)		)-2999)		-5999)		00+)
SURGICAL				Standard		Standard		Standard	1	Standard	(000)	Standard	100	Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	64510	Injection, anesthetic agent; stellat	\$165.34	N.A.	\$111.24	\$56,18	N.A.	N.A.	\$67.41	\$6.85	\$89.04	\$32.84	\$46.63	\$1.08
CPT CODE		Injection, anesthetic agent; lumbar		\$25.13	\$167.99	\$57.00	\$214.36	\$238.80	\$103.34	N.A.	\$121.63	\$87.41	\$68.08	\$47.99
APG#		REVISION & REMOVAL OF NEURO						1200.00	* 100101	141711	*121100	407.41	¥00.00	V47.33
CPT CODE		Revision or removal of spinal neur	N.A.	N.A.	\$534.33	N.A.	\$318.61	\$8.62	N.A.	N.A.	\$230.43	N.A.	N.A.	N.A.
CPT CODE		Revision or removal of spinal neur	\$215.23	N.A.	\$534.33	N.A.	\$317.94	\$9.56	N.A.	N.A.	\$267.44	N.A.	N.A.	N.A.
APG#	268	NEUROSTIMULATOR AND VENTRI		NT IMPLAN				10.00	110.0		1207141	141731	14.75	11.0.
CPT CODE		Percutaneous implantation of neur	\$286.56	N.A.	N.A.	N.A.	\$330.05	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Percutaneous implantation of neur	N.A.	N.A.	N.A.	N.A.	\$383,22	N.A.	N.A.	N.A.	N.A.	N.A.	\$305.57	N.A.
APG#		CARPAL TUNNEL RELEASE		1100 11	1407.0	141741	+000.EE	11.75	11.0.	14.7.	14.0.	IN.A.	7300.57	IV.A.
CPT CODE		Neuroplasty and/or transposition;	\$284.88	\$33.21	\$259.62	\$62,41	\$254.46	\$44.41	\$219.80	\$43.30	\$236.21	\$62.38	\$251.04	\$66.10
APG#		NERVE REPAIR & DESTRUCTION		100121	. 200.02	7021-11	.254.40	277.71	-210.00	740.00	7230.21	702.38	VZ31.04	900.10
CPT CODE		Neuroplasty and/or transposition u	\$303.70	\$40,49	\$320.82	\$81.76	\$269.35	\$15.14	\$287.18	\$137.70	\$321.16	\$64.96	\$351.04	\$13.27
PT CODE		Neuroplasty and/or transposition:	\$346.13	\$167.23	\$311.97	\$105.69	\$264.98	\$21.32	\$225.01	\$30.73	\$244.84	\$59.23	\$351.04	\$7.99
APG#	271	COMPLEX NERVE REPAIR		. 107.20	.011.37		-204.00	421.02	+220.01	730.73	v244.04	405.23	V347.20	97.39
CPT CODE		Suture of digital nerve, hand or fo	\$393.80	\$156.25	\$334.73	\$57.87	\$241.82	\$54.06	\$365.13	N.A.	\$270.67	\$26.99	\$343.22	\$0.77
PT CODE		Suture of one nerve, hand or foot;	\$293,48	\$15.75	\$338.14	\$58.81	\$241.82	\$54.06	\$407.68	N.A.	\$269.82	\$21.48	\$301.67	\$47.38
APG#		SPINAL TAP	V233.40	V10.70	V336.14	750.01	7241.02	\$54.00	9407.00	IV.A.	\$209.82	921.48	\$301.67	\$47.38
PT CODE		Spinal puncture, lumbar, diagnosti	\$96,41	\$35.76	\$111.15	\$63.06	\$114.02	\$81,74	N.A.	N.A.	N.A.	N.A.		
PT CODE		Spinal puncture, therapeutic, for d	N.A.	N.A.	\$71.29	\$12.64	\$224.34	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#		MINOR OPTHALMOLOGICAL TEST			771.23	\$12.04	9ZZ4.34	IV.A.	IV.A.	N.A.	IV.A.	N.A.	N.A.	N.A.
PT CODE		Ophthalmoscopy, with medical dia	N.A.	N.A.	N.A. *	N.A.	\$12.28	N.A.	N.A.	N.A.	N.A.	N.A.		
APG#		SIMPLE LASER EYE PROCEDURES	111/21	14.75.	14.7.	11.7.	712.20	14.0.	IV.A.	IV.A.	IV.A.	IN.A.	N.A.	N.A.
OPT CODE		Trabeculoplasty by laser surgery.	\$76.24	N.A.	\$216.36	\$54.99	\$158.26	\$60.02	\$46.74	N.A.	\$75.14	N.A.	\$35,41	
OPT CODE		Discission of secondary membran	\$378.97	\$70.39	\$487.56	\$107.77	\$436.05	\$133.56	\$166,13		\$230.46	\$59.49		N.A.
APG#		COMPLEX LASER EYE PROCEDURE		470.35	9407.50	\$107.77	\$436.05	\$133.50	\$100.13	\$209.00	\$230.46	\$59.49	\$272.65	\$164.35
PT CODE		Repair of retinal detachment, one	N.A.	N.A.	\$266.23	\$297.41	\$360.66		\$125,17					
CPT CODE		Destruction of extensive or progre	N.A.	N.A.		\$297.41		N.A.		N.A.	\$343.77	\$118.13	N.A.	N.A.
APG#		CATARACT PROCEDURES	N.A.	N.A.	\$265.21	\$298.84	\$95.51	\$14.19	\$42.97	N.A.	\$30.33	\$25.51	N.A.	N.A.
PT CODE		Removal of lens material; phacofr	\$385.63	\$90.75	\$294.33	\$149.50	4470.00	400.00	1057.10					
CPT CODE		Extraction of lens with or without					\$173.99	\$26.99	\$357.19	\$137.15	\$361.50	\$56.93	\$274.92	N.A.
PT CODE		Intracapsular cataract extraction	\$386.19 \$550.27	\$154.78	\$350.65	\$279.88	\$215.03	\$136.30	\$318.77	\$121.64	\$362.32	\$84.41	\$575.02	\$188.08
OPT CODE					\$690.50	\$107.68	\$542.99	\$178.10	\$547.63	\$196.66	\$546.46	\$7.48	\$637.97	\$130.92
PT CODE		Extracapsular cataract removal wi	\$545.63	\$97.42	\$661.68	\$90.25	\$688.74	\$344.50	\$527.98	\$182.00	\$527.91	\$128.13	\$606.89	\$128.15
		Insertion of intraocular lens subse	\$538.76	\$83.98	\$533.04	\$66.58	\$420.24	\$72.83	\$463.42	\$205.96	\$497.23	\$115.85	\$586.85	\$131.20
APG#		SIMPLE ANTERIOR SEGMENT EYE												
PT CODE		Iridotomy by stab incision (separat	\$306.38	\$59.30	\$270.72	\$54.94	\$153.01	N.A.	\$273.03	N.A.	\$183.73	\$47.66	\$216.60	N.A.
PT CODE		Cyclocryotherapy initial	N.A.	N.A.	\$251.25	N.A.	\$188.87	N.A.	\$89.84	\$39.40	\$218.19	\$73.38	N.A.	N.A.
PG#		COMPLEX ANTERIOR SEGMENT EY												I
PT CODE		Fistulization of sclera for glaucom	\$278.58	N.A.	\$309.56	N.A.	\$208.43	N.A.	\$203.26	\$134.68	\$270.07	N.A.	N.A.	N.A.
PT CODE		Fistulization of sclera for glaucom	N.A.	N.A.	\$308.76	\$67.85	\$248.14	\$47.37	\$296.76	\$139.92	\$340.98	\$83.55	N.A.	N.A.
PG#		SIMPLE ANTERIOR SEGMENT EYE												
PT CODE		Destruction of lesion of cornea by	\$106.36	N.A.	\$178.18	N.A.	\$167.83	N.A.	\$132.79	N.A.	\$156.22	\$83.18	\$147.63	N.A.
PT CODE		Discussion or secondary membran	\$294.41	\$90.83	\$690.90	\$229.33	\$155.84	N.A.	\$248.67	\$201.66	\$313.19	\$57.51	N.A.	N.A.
PG#		MODERATE ANTERIOR SEGMENT I											1	
PT CODE		Iridectomy, w/corneoscleral or cor	\$333.55	N.A.	\$251.66	\$81.88	\$214.65	N.A.	\$197.43	\$87.97	\$216.08	\$68.32	\$303.67	N.A.
PT CODE	66830	Removal of secondary membraneo	\$333.89	\$93.00	\$556.57	\$299.14	\$153.82	N.A.	\$475.07	N.A.	N.A.	N.A.	N.A.	N.A.

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## MEAN AND STANDARD DEVIATION FOR TOTAL DIRECT COSTS BY FACILITY TYPE AND VOLUME - SURGICAL PROCEDURES Total Direct Costs -Hospitals A.S.C.s Volume Volume Volume Volume Volume Volume (1000-2999) (3000-5999) (1000-2999) (3000-5999) (60000 + 1)(6000+) SURGICAL Standard Standard Standard Standard Standard Standard PROCEDURES APG AND CPT DESCRIPTION Deviation Mean Deviation Deviation Deviation Mean Mean Mean Mean Deviation Mean Deviation 55700 Biopsy, prostate needle or punch s \$210.68 \$53.24 \$223.62 \$74.53 \$244.96 \$65.91 \$162.63 N.A. \$229.78 \$237.50 \$80.39 \$90.03 CPT CODE 55705 Bionsy, prostate incisional, any ap \$250.55 \$50.53 \$259.24 \$58.46 \$248.91 NΔ \$306.07 N.A. \$246.57 \$235.49 N.A. 214 TRANSURETHRAL RESECTION OF PROSTATE & OTHER PROSTATE PROCEDURE CPT CODE 52500 Transurethral resection of bladder \$307.60 \$70 70 \$281.53 \$70.32 \$232.22 \$80.98 \$269.38 \$254.66 \$85.30 \$327.62 N.A CPT CODE 52601 Transurethral resection or prostate \$356.49 \$84.55 \$317.75 \$78.95 \$206.88 \$31.88 N.A. \$382.00 N.A. N.A. N.A. N.A. 236 PROCEDURES FOR PREGNANCY & NEONATAL CARE CPT CODE ΝΔ ΝΔ \$40.58 ΝΔ ΝΔ NΔ ΝΔ N.A. CPT CODE 59050 Initiation and/or supervision of inte ΝΔ ΝΔ \$93.12 ΝΔ ΝΔ ΝΔ ΝΔ NΔ NΔ NΔ NΔ NΔ 237 PROCEDURES FOR PREGNANCY & NEONATAL CARE APG# CPT CODE 59801 Treatment of spontageous abortio | \$231.42 \$68.57 \$163.86 \$203.26 \$50.03 \$185.51 \$87.27 \$198.44 \$185.78 59820 Treatment of missed abortion, any \$232.92 \$43.01 \$40.13 \$64.64 \$27.60 \$197.84 \$32.58 APG# 238 THERAPEUTIC ASORTION CPT CODE 59840 Legal (therapeutic ) abortion, by di \$248,26 \$47.78 \$228.00 \$81.38 \$167.88 NΔ 435 00 \$184.51 \$14.34 \$163.81 N.A CPT CODE 59841 Legal (therapeutic) abortion, by dil \$218.75 \$37.91 \$17.10 \$167.88 ΝΔ \$64.86 \$186.83 \$32.17 \$182.79 \$42.76 240 FEMALE GENITAL ENDOSCOPY 58980 Laparoscopy for visualization of p \$383.67 \$112.86 \$411.06 \$366.07 \$27.78 \$326.65 \$109.45 \$364.73 \$139.58 \$433 74 \$94.84 58985 Laparoscopy for visualization of p \$403.43 \$104.65 \$400.76 \$449.58 \$118.97 \$372.16 \$231.43 \$433.90 \$218.03 \$542.91 \$164.38 COLPOSCOPY \$235.59 57452 Colposcopy (vaginoscopy); (separ | \$216.89 \$25.03 \$196.09 \$23.28 \$251.12 ΝΔ \$127,33 \$200.09 \$36.20 \$169.37 \$67.54 57454 Colposcopy (vacinoscopy): with hi \$229.70 \$54.49 \$53.52 \$51.91 \$348.06 ΝΔ \$30.16 \$164.72 \$102.84 242 MISC. FEMALE REPRODUCTIVE PROCEDURES 56600 Biopsy of vulva (separate procedu \$242.41 \$290.25 \$43.93 \$26.50 \$254.29 \$21.68 \$264.82 \$63.81 \$242.51 \$39.12 \$234.27 \$35.52 57520 Biopsy of cervix, circumferential ( \$260.42 \$46.04 \$262.80 \$268.50 \$66.79 \$219.77 \$41.58 \$277.41 \$32.96 \$252.92 \$15.87 243 DILATION & CURETTAGE CPT CODE 57820 Dilation and curettage of cervical \$51.03 \$230.12 NΑ \$186.38 N.A. \$227.80 \$17.13 58120 Dilation and curettage, diagnostic \$264.96 \$48 37 \$247.82 \$52 32 \$307.81 \$28.15 \$233.56 \$92.36 \$249.00 \$28.21 \$196.21 \$28.62 APG# 244 FEMALE GENITAL EXCISION & REPAIR \$92.17 \$66.01 56620 Vulvectomy: partial\_upilateral or bl \$328.98 \$62.49 \$306.84 \$54.65 \$331.55 \$213.27 \$296.25 \$243.16 57135 Excision of vaginal cyst or tumor \$47.52 \$258.52 \$37.94 \$282.38 \$31.25 \$258.30 \$69.76 \$258.76 \$46.95 \$16.67 261 FLECTROENCEPHALOGRAM APG# CPT CODE 95819 Electroencephalogram (EEG) inclu N.A N.A \$39.66 \$19.71 \$51.92 \$14.14 N.A. NA ΝΔ ΝΔ ΝΔ CPT CODE 95828 Polysomnography (recording, anal. \$242.65 \$391.56 \$42.55 N.A. N.A. N.A. N.A. N.A. N.A. NΑ ΝΔ ΝΔ 262 ELECTROCONVULSIVE THERAPY CPT CODE 90870 Electroconvulsive therapy (include ΝΔ ΝΔ ΝΔ NΔ NΔ N.A. N.A. N.A. N.A. CPT CODE 90871 Electroconvulsive therapy (include N.A. N.A. ΝΔ NΔ \$32.91 N.A. N.A. N.A. N.A. N.A. N.A. N.A. 263 NERVE & MUSCLE TESTS CPT CODE 95900 Nerve conduction, velocity and/or ΝΔ ΝΔ \$3.16 NΔ \$6.26 NΔ NΔ NΑ NΔ N.A N A \$8.89 \$11.46 95904 Nerve conduction, velocity and/or N.A \$3.16 N.A. NΔ ΝΔ ΝΔ ΝΔ NΔ 264 INJECTION OF SUBSTANCE INTO SPINAL CORD 62278 Injection of anesthetic substance \$151 34 \$186.00 489 81 \$62.59 \$89.70 \$26.87 \$88.96 \$30.30 \$52.37 62289 Injection of substance other than ΝΔ \$70.93 ΝΔ \$91.76 \$14.86 \$53.65 N.A. 265 SUBDURAL & SUBARACHNOID TAP 62225 Replacement or irrigation, ventricu CPT CODE N.A. N.A N.A N.A. \$69.75 N.A. N.A. N.A. N.A. ΝΔ NΔ CPT CODE 63744 Replacement, irrigation or revision ΝΔ ΝΔ N.A. \$318.18 N.A. N.A. N.A. N.A. N.A. N.A. N.A 266 NERVE IN JECTION & STIMULATION



Standard

Deviation

\$160.25

\$221.81

\$161.55

\$271.66

\$314.76 \$153.32

ASCE

Median

\$294.72

\$327.86

\$318.74

\$318.70

\$150.95

\$290.24

\$460.34

\$466.65

\$162.23

\$226.90

\$322.78

\$304.18

Hospitals

\$220.49 \$190.73 \$121.56

\$267.72 | \$206.71 | \$158.77

\$317.84 \$229.27 \$226.90

\$342.34 \$298.94 \$176.63

\$261.96 \$182.88 \$158.87

Standard

Mean

\$282.25

\$350.48

\$342.77

\$325.87

\$381.61

Median Deviation

\$220.70 \$218.96 \$105.93 \$216.90

\$232.55

\$338.04

\$475.72

\$475.29

\$237.23 \$201.38 \$170.13 \$273.28 \$213.38 \$169.10

\$280.02 | \$206.71

\$377.81 \$248.76 \$233.71

30520 Septoplasty or submucous resection, with or without cartilage scoring, contouring or replacemen \$319.42 \$251.50 \$171.47

MEAN, MEDIAN, & STANDARD DEVIATION FOR TOTAL INDIRECT COSTS - SURGICAL PROCEDURES

APG & CPT DESCRIPTION

SURGICAL

APG#

APG#

CPT CODE

CPT CODE

CPT CODE

CPT CODE

CPT CODE

APG#

PROCEDURES

19101 Bionsy of breast, incisional

19182 Mastectomy, subcutaneous

53 OCCUPATIONAL THERAPY

30111 Excision, nasal polyp(s), simple bilateral

66 INCISION OF BONE JOINT, & TENDON

31020 Sinusotomy, maxillary (antrotomy); intranasal, unilateral 65 COMPLEX MAXILLOFACIAL PROCEDURES

25000 Tendon sheath incision at radial styloid for deQuervain's disease

30620 Reconstruction, functional, internal nose (septal or other intranasal dermatoplasty)

19160 Mastectomy, partial

19120 Excision or cyst, fibroadenoma, or other benign or malignant

19140 Mastectomy for gynecomastia through circular or other incision

28 BREAST RECONSTRUCTION & MASTECTOMY

		MEAN, MEDIAN, & STANDARD DEVIATION FOR TOTAL INDIRECT COST	Hospitals			A.S.C.s		
			Standar				Standard	
SURGICAL	1	The second of th	Mean	Median	Deviation	Mean	Median	Deviation
PROCEDURES		APG & CPT DESCRIPTION		\$273.36	\$255.17	\$348.39	\$224.06	\$274.29
CPT CODE		Capsulotomy for contracture; metatarso-phalangeal joint, with(out) tenorrhaphy, single, joint, ea	\$311.07	\$275.50	V2.00.17	40.40100		
APG#	67	BUNION PROCEDURES	42CE 76	\$218.96	\$154.44	\$469.27	\$368.27	\$346.22
CPT CODE	28290	Hallux valgus (bunion) correction, with or without sesamoidectomy; simple exostectomy (Silver t	\$325.11	\$254.24	\$242.81	\$417.65	\$358.83	\$291.67
CPT CODE	28292	Hallux valgus (bunion) correction, with or without sesamoidectomy; simple exostectomy (Keller,	\$325.11	\$254.24	9242.01	\$417.00	¥550.00	7201101
APG#	68	EXCISION OF BONE, JOINT & TENDON OF THE HAND & FOOT	A220 01	\$193.52	\$162.82	\$290.84	\$263.15	\$192.01
CPT CODE	26160	Excision or lesion of tendon sheath or capsule (e.g., cyst, mucous cyst, ganglion), hand or finger	\$218.98		\$107.76	\$329.36	\$323.55	\$199.86
CPT CODE	28080	Excision of interdigital (Morton) neuroma, single, each	\$218.98	\$204.42	\$107.76	7323.30	V020.00	4100100
APG#	69	EXCISION OF BONE , JOINT & TENDON EXCEPT HAND & FOOT	\$223.72	£104 70	\$141.59	\$289.76	\$250.00	\$171.75
CPT CODE	24105	Excision, olecranon bursa	\$191.31	\$175.75	\$112.03	\$301.07	\$261.56	\$185.70
CPT CODE		Excision of synovial cyst of popiteal space (Baker's cyst)	\$191.31	\$1/5./5	\$112.03	\$301.07	V201.50	¥100174
APG#	70	ARTHROPLASTY	4000.50	\$250.07	\$225.22	\$249.93	\$202.82	\$127.07
CPT CODE		Interposition arthroplasty, intercarpal or carpometacarpal joints	\$333.56		\$157.71	\$199.72	\$123.50	\$124.94
CPT CODE	26535	Arthroplasty interphalangeal joint; single, each	\$266.20	\$222.81	\$157.71	\$199.72	\$123.50	V124.34
APG#	71	HAND & FOOT TENOTOMY	4000 50	4404 70	A105 20	\$264.94	\$235.92	\$174.32
CPT CODE		Tenotomy, flexor, single, finger open, each	\$228.58	\$181.79		\$325.51	\$144.55	\$295.19
CPT CODE	28234	Tenotomy, open, extensor, foot or toe	\$198.06	\$162.21	\$121.13	\$320.01	\$144.00	9230.13
APG#	72	SIMPLE HAND & FOOT REPAIR EXCEPT TENOTOMY				4050.00	A257.02	\$157.19
CPT CODE	26055	Tendon sheath incision for trigger finger	\$209.89	\$154.05	\$151.90	\$256.89	\$257.82	\$248.58
CPT CODE	28285	Hammertoe operation, one tow (e.g., interphalangeal fusion, filleting, phalangectomy)	\$270.07	\$239.86	\$155.09	\$371.27	\$327.86	\$246.50
APG#	73	COMPLEX HAND & FOOT REPAIR					1010 10	\$309.89
CPT CODE	26860	Arthrodesis, interphalangeal joint; with or w/o internal fix		\$286.68	\$160.20	\$423.28	\$319.42	
CPT CODE	28810	Amputation, metatarsal, with toe, single	\$200.79	\$175.96	\$123.95	\$295.38	\$211.52	\$285.11
APG#	74	REPAIR, EXCEPT ARTHROTOMY, OF BONE, JOINT, TENDON EXCEPT OF HAND & FOOT						1100.01
CPT CODE	23420	Repair of complete shoulder (rotator) cuff avulsion, chronic	\$313.41	\$296.87	\$143.11	\$631.39	\$536.05	\$422.81
CPT CODE	25260	Repair, tendon or muscle, flexor, forearm and/or wrist; prim	\$322.71	\$219.95	\$320.31	\$408.38	\$294.95	\$415.72
APG#	75	ARTHROTOMY EXCEPT OF HAND & FOOT						15101
CPT CODE	27332	Arthrotomy, knee, for excision of semilunar cartilage (meniscectomy); medial or lateral		\$217.45	\$108.26	\$184.04	\$188.46	\$54.21
CPT CODE	27333	Arthrotomy, knee, for excision of semilunar cartilage (meniscectomy); medial and lateral	\$221.00	\$206.71	\$98.49	\$198.60	\$188.46	\$75.16
APG#	76	ARTHROCENTESIS & LIGAMENT OR TENDON INJECTION	1					
CPT CODE	20550	Injection, tendon sheath, ligament, trigger points or ganglion cyst		\$116.78	\$186.07	\$230.22	\$308.77	\$124.3
CPT CODE	20605	Arthrocentesis, aspiration and/or injection; intermediate joint, bursa or ganglion cyst	\$200.97	\$145.81	\$195.19	\$177.63	\$74.65	\$152.14
CPT CODE	20610	Arthrocentesis, aspiration and/or injection; major joint or bursa	\$142.35	\$134.36	\$69.21	\$115.30	\$74.65	\$90.18
APG#	77	SPEECH THERAPY				l	1	
CPT CODE	92507	Speech, language or hearing therapy, with continuing medical supervision; group	\$51.59	\$40.77	\$37.94	N.A.	N.A.	N.A.
CPT CODE	92508	Speech, language or hearing therapy, with continuing medical supervision; individual	\$39.02	\$38.73	\$7.24	N.A.	N.A.	N.A.
APG#	79	PULMONARY TEST & THERAPY EXCEPT SPIROMETRY						
CPT CODE		Intermittent positive pressure breathing (IPP8) treatment, a	\$21.49	\$19.08	\$6.62	N.A.	N.A.	N.A.
CPT CODE	94760	Noninvasive ear or pulse oximetry for oxygen saturation; sin	\$10.93	\$8.36	\$6.10	N.A.	N.A.	N.A.
APG#	80	NEEDLE & CATHETER BIOPSY, ASPIRATION, LAVAGE & INTUBATION						l
CPT CODE		Thoracentesis, puncture or pleural cavity for aspiration, in	\$192.45	\$200.33	\$79.23	\$159.12	\$159.12	N.A.
CPT CODE		Biopsy, lung or mediastinum, percutaneous needle	\$325.68	\$329.44	\$200.55	N.A.	N.A.	N.A.
APG#	81	SIMPLE ENDOSCOPY OF THE UPPER AIRWAY						
CPT CODE		Laryngoscopy, indirect (separate procedure); diagnostic	\$125.69	\$111.16	\$65.02	\$201.83	\$181.18	\$134.3
CPT CODE		Laryngoscopy, indirect (separate procedure) with biopsy	\$131.45	\$120.30	\$65.89	\$176.25	\$121.53	\$147.4
APG#	82	COMPLEX ENDOSCOPY OF THE UPPER AIRWAY						
CPT CODE		Laryngoscopy, direct, operative with biopsy	\$183.82	\$165.27	\$82.71	\$216.29	\$227.51	\$117.4
CPT CODE	215/1	Laryngoscopy, direct, operative, with excision of tumor, w/o	\$200.58	\$204.34	\$91.68	\$261.52	\$217.53	\$178.8
		SIMPLE ENDOSCOPY OF THE LOWER AIRWAY	_	_				1

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		MEAN, MEDIAN, & STANDARD DEVIATION FOR TOTAL INDIRECT COST	S - SURC	ICAL PR	OCEDURE	S		
				Hospitals			A.S.C.s	
SURGICAL	+				Standard			Standard
PROCEDURES	-	APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
CPT CODE	21622	Bronchoscopy diagnostic, (flexible or rigid), w/ or w/o cell	\$183.56	\$145.71	\$116.76	\$272.09	\$240.34	\$168.59
CPT CODE		Bronchoscopy with biopsy	\$197.38	\$155.92	\$124.49	\$211.10	\$140.09	\$174.65
APG#	84	COMPLEX ENDOSCOPY OF THE LOWER AIRWAY						
CPT CODE	21628	Bronchoscopy w/ transbronchial lung biopsy w/ or w/o fluoroscopic guidance	\$209.40	\$204.56	\$125.20	\$336.42	\$336.42	\$188.94
CPT CODE		Bronchoscopy with transbronchial needle aspiration biopsy	\$202.72	\$233.50	\$87.73	\$159.12	\$159.12	N.A.
APG#	85	NASAL CAUTERIZATION & PACKING						
CPT CODE	30901	Control nasal hemorrhage, anterior, simple (cauterization);	\$158.63	\$112.62	\$101.72	\$155.51	\$113.01	\$117.29
CPT CODE		Control nasal hemorrhage, anterior, complex (cauterization w	\$163.20	\$112.62	\$96.40	\$221.79	\$232.25	\$114.39
	86	SIMPLE LIP, MOUTH & SALIVARY GLAND PROCEDURES						
APG#		Excision of lesion of tongue without closure	\$162.03	\$130.78	\$83.90	\$164.26	\$163.87	\$64.18
CPT CODE		Excision of lesion of tongue with closure; anterior two-thirds	\$176.57		\$108.16	\$136.20	\$125.55	\$69.05
CPT CODE		COMPLEX LIP, MOUTH, & SALIVARY GLAND PROCEDURES						
APG#	87	Vermilionectomy (lip shave), mucosal advancement	\$147.14	\$119.42	\$56.87	\$179.43	\$141.23	\$127.34
CPT CODE	40500	Excision of parotid tumor or parotid gland; lateral lobe, w/	\$420.76		\$221.57	\$316.98	\$261.50	\$245.75
CPT CODE	88	MISCELLANEOUS SINUS, TRACHEAL & LUNG PROCEDURES						
APG#	21020	Sinusotomy, maxillary (antrotomy); radical (Caldwell-Luc) with removal of antrochoanal polyps	\$311.87	\$232.77	\$179.14	\$464.29	\$290.24	\$340.91
CPT CODE		Ethmoidectomy intranasal, anterior		\$277.07	\$182.49	\$395.93	\$356.59	\$232.80
CPT CODE		EXERCISE TOLERANCE TESTS						
APG#	105	Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise; continuou	\$103.02	\$64.25	\$143.67	N.A.	N.A.	N.A.
CPT CODE	93015	Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise; continuou	\$62.30	\$63.94	\$17.21	N.A.	N.A.	N.A.
CPT CODE			102100	100101				
APG#	106	ECHOCARDIOGRAPHY  Echocardiography, real-time with image documentation (2D) with or without M-mode recording;	\$113.61	\$65.84	\$176.79	N.A.	N.A.	N.A.
CPT CODE	93307	Doppler echocardiography, pulsed wave and/or continuous wave with spectral display; complete		\$22.68	\$114.01	N.A.	N.A.	N.A.
CPT CODE		CARDIAC ELECTROPHYSIOLOGIC TESTS	400111				-	
APG#	108		\$117.78	\$106.68	\$58.58	N.A.	N.A.	N.A.
CPT CODE		Cardioversion, electrical conversion of arrhythmia, external	\$124.22	\$118.47	\$49.58	N.A.	N.A.	N.A.
CPT CODE		Induction of arrhythmia by electrical pacing	712.7.22	***********	7			
APG#	109	VASCULAR CANNULATION WITH NEEDLE & CATHETER  Placement of central venous catheter (subclavian, jugular, or other vein), percutaneous, over age	\$145.68	\$127.97	\$86.95	\$384.08	\$384.08	N.A.
CPT CODE			\$224.66	\$229.69	\$141.17	N.A.	N.A.	N.A.
CPT CODE		Cannula declotting without balloon catheter	V224.00	7220.00	*******			
APG#	110	DIAGNOSTIC CARDIAC CATHETERIZATION	\$89.00	\$70.60	\$50.84	N.A.	N.A.	N.A.
CPT CODE	93547	Combined left heart catheterization, selective coronary angiography, one or more coronary arteri		\$105.41	\$74.37	N.A.	N.A.	N.A.
CPT CODE		Combined right and left heart catheterization, selective coronary angiography, one or more coron	V131.01	V100.41	47,1107			
APG#	111	ANGIOPLASTY & TRANSCATHETER PROCEDURES	\$209.18	\$159.82	\$141.74	N.A.	N.A.	N.A.
CPT CODE		Percutaneous transluminal angioplasty, any method, peripheral artery		\$243.09	\$85.81	N.A.	N.A.	N.A.
CPT CODE		Percutaneous transluminal coronary balloon angioplasty; single vessel	\$241.03	\$243.05	900.01	14.6.	11.6.	141741
APG#	112	PACEMAKER INSERTION & REPLACEMENT	\$316.47	\$322.19	\$160.04	N.A.	N.A.	N.A.
CPT CODE		Insertion or replacement of pacemaker pulse generator or AID	\$318.47			N.A.	N.A.	N.A.
CPT CODE		Repair of pacemaker with replacement of pulse generator	9303.27	9200.52	\$170.03	14.70	14.70.	141711
APG#	113	REMOVAL & REVISION OF PACEMAKER & VASCULAR DEVICE	4200 00	\$326.52	\$203.86	N.A.	N.A.	N.A.
CPT CODE	33216	Insertion, replacement, or repositioning of permanent transvenous electrodes only (15 days of m	\$208.74		\$200.98	\$342.19	\$290.57	\$246.73
CPT CODE		Removal of implantable intravenous infusion pump or venous a	9208.74	9138.83	7200.90	7542.15	V230.07	72.40.75
APG#	114	MINOR VASCULAR REPAIR & FISTULA CONSTRUCTION	\$274.00	\$268.82	\$154.34	\$155.44	\$155,44	N.A.
CPT CODE		Thrombectomy and/or repair of arterial or venous graft		\$204.34	\$145.85	\$259.48	\$290.57	\$120.43
CPT CODE		Insertion of implantable intravenous infusion pump or venous	9238.29	9ZU4.34	7140.00	V2J3.40	V2.50.57	7120.40
APG#	115	SECONDARY VARICOSE VEINS & VASCULAR INJECTION	A407 F2	6207.14	\$261.02	\$472.20	\$391.18	\$262.75
CPT CODE		Ligation, division, and/or excision of secondary varicose veins (clusters), one leg		\$387.14	N.A.	\$349.86	\$349.86	N.A.
CPT CODE		Unlisted procedure, vascular surgery	\$172.43	191/2.43	N.A.	9349.00	7349.00	14.PA.
APG#	116	VASCULAR LIGATION						

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		MEAN, MEDIAN, & STANDARD DEVIATION FOR TOTAL INDIRECT COSTS	- SURG	ICAL PR	OCEDURE		100:	
				Hospitals			A.S.C.s	Or a dead
0.100.01					Standard			Standard
PROCEDURES	+	APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
CPT CODE	27619	Ligation, major artery (e.g., post-traumatic, rupture); extremity	\$253.96		\$88.94	N.A.	N.A.	N.A.
CPT CODE	27650	Interrupting, partial or complete, or femoral vein, by ligature, intravascular device	\$315.92		\$260.97	N.A.	N.A.	N.A.
CPT CODE	37000	Ligation and division and complete stripping of long or short saphenous veins	\$321.46	\$276.23	\$213.76	\$373.03	\$373.95	\$208.92
	117	CARDIOPULMONARY RESUSCITATION & INTUBATION						407.00
APG#	21500	Intubation, endotracheal, emergency procedure	\$86.31	\$58.36	\$70.36	\$52.39	\$52.39	\$27.32
CPT CODE	31300	Cardiopulmonary resuscitation (e.g., in cardiac arrest)	\$141.85	\$106.42	\$88.10	N.A.	N.A.	N.A.
CPT CODE	131	CHEMOTHERAPY BY INFUSION						
APG#	00501	Chemotherapy injection, intravenous, single premixed agent,	\$177.43		\$171.74	N.A.	N.A.	N.A.
CPT CODE	96501	Chemotherapy injection, intravenous, complex, using 1 or more	\$288.18	\$303.61	\$175.31	N.A.	N.A.	N.A.
CPT CODE	96509	Chemotherapy inject, iv, complex, using 1 or more agents req.	\$379.64	\$379.64	\$93.31	N.A.	N.A.	N.A.
CPT CODE	96510	CHEMOTHERAPY EXCEPT BY INFUSION						
APG#	132	Chemotherapy injection, intravenous, single premixed agent,	\$85.34	\$92.80	\$55.75	N.A.	N.A.	N.A.
CPT CODE		Unlisted chemotherapy procedure	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	96549	TRANSFUSION & PHLEBOTOMY						-
APG#	133	Transfusion, blood or blood components	\$148.81	\$121.81	\$102.05	\$194.13	\$194.13	N.A.
CPT CODE	36430	Push transfusion, blood, 2 years or under	\$132.71	\$132.71	\$36.96	N.A.	N.A.	N.A.
CPT CODE	36440	DEEP LYMPH STRUCTURE & THYROID PROCEDURES						1
APG#	135	Biopsy or excision of lymph node(s); deep cervical node(s)	\$253.60	\$198.31	\$154.43	\$274.40	\$223.94	\$207.8
CPT CODE	38510	Biopsy or excision of lymph node(s); deep exhibit node(s)	\$276.85	\$226.18	\$196.15	\$261.88	\$260.14	\$135.30
CPT CODE								
APG#	157		\$82.42	\$62.62	\$49.77	N.A.	N.A.	N.A.
CPT CODE	91010	Esophageal motility study Esophagus, acid perfusion (Bernstein) test for esophagitis	\$62.78	\$62.78	\$0.23	N.A.	N.A.	N.A.
CPT CODE		ESOPHAGEAL DILATION WITHOUT ENDOSCOPY						
APG#	158	D Dilation of esophagus, by unguided sound or bougie, single o	\$114.77	\$112.83	\$74.55	\$168.96	\$207.30	\$116.3
CPT CODE	43450	Dilation of esophagus, by unguided sound or bodgle, single o	\$101.73	\$95.45	\$74.76	\$146.46	\$140.63	\$105.9
CPT CODE	43451	PERCUTANEOUS & OTHER SIMPLE GASTROINTESTINAL BIOPSY						
APG#			\$216.29	\$157.23	\$193.76	\$103.46	\$103.46	\$1.92
CPT CODE	47000	Biopsy of liver, percutaneous needle Biopsy, abdominal or retroperitoneal mass, percutaneous needle	\$143.63	\$103.61	\$96.53	\$102.10	\$102.10	N.A.
CPT CODE	49180	D Esophageal intubation and collection of washings for cytology, including preparation of specimen	\$141.83	\$141.83	\$44.76	N.A.	N.A.	N.A.
CPT CODE		ANOSCOPY WITH BIOPSY & DIAGNOSTIC PROCTOSIGMOIDOSCOPY						
APG#	160	ANOSCOPY WITH BIOPST & DIAGNOSTIC PROCEDURAN	\$92.05	\$92.05	\$52.95	\$117.85	\$83.77	\$102.3
CPT CODE	45300	Proctosigmoidoscopy diagnostic (separate procedure)	\$115.54	\$107.42	\$80.72	\$174.86	\$115.42	\$133.0
CPT CODE	45330	Sigmoidoscopy, flexible fiberoptic diagnostic	\$102.12	\$86.72	\$71.95	\$115.50	\$99.08	\$89.9
CPT CODE		Anoscopy for removal of polyp PROCTOSIGMOIDOSCOPY WITH EXCISION OR BIOPSY						
APG#	161	PROCTOSIGMOIDUSCOPY WITH EXCISION ON BIOFST	\$123.89	\$130.80	\$81.87	\$137.51	\$105.90	\$92.4
CPT CODE	4533	1 Sigmoidoscopy, flexible fiberoptic for biopsy and/or collect	\$146.41	\$130.80	\$91.48	\$163.15	\$121.01	\$132.5
CPT CODE	4533	3 Sigmoidoscopy, flexible fiberoptic for removal of polypoid I						
APG#	162	DIAGNOSTIC UPPER GASTROINTESTINAL ENDOSCOPY	\$115.61	\$126.45	\$71.42	\$151.49	\$96.37	\$110.8
CPT CODE	4323	Upper GI endoscopy including esophagus, stomach and either d 9 Upper GI endoscopy incl. esophagus etc. for biopsy and/or collection of specimen by brushing or	\$139.11	\$148.94	\$85.50	\$187.83	\$149.62	\$114.9
CPT CODE		9 Upper Gl endoscopy Incl. esophagus etc. for blopsy and/or collection of specimental processing of	1					
APG#	163	THERAPEUTIC UPPER GASTROINTESTINAL ENDOSCOPY	\$122.08	\$116.35	\$90.31	\$175.76	\$156.79	\$107.2
CPT CODE	4324	5 Upper GI endoscopy including esophagus etc. for dilation of 6 Upper GI endoscopy including esophagus etc. for directed placement of percutaneous gastrosto		\$110.30	\$85.83	\$152.91	\$144.55	\$96.6
CPT CODE		6 Upper GI endoscopy including esophagus etc. for directed placement of percutations gastrosto	1	1				
APG#	164	DIAGNOSTIC LOWER GASTROINTESTINAL ENDOSCOPY	\$172,59	\$159.25	\$125.76	\$207.39	\$115.42	\$167.5
CPT CODE	4537	B Colonoscopy, fiberoptic, beyond splenic flexure; diagnostic		\$177.43		\$244.23	\$207.01	: \$171.2
CPT CODE		O Colonoscopy, fiberoptic, beyond splenic flexure; for biopsy						1
APG#	165	THERAPEUTIC LOWER GASTROINTESTINAL ENDOSCOPY	\$234.50	\$213.06	\$171.38	\$211.68	\$192.43	\$126.7
CPT CODE	4538	3 Colonoscopy, fiberoptic, beyond splenic flexure; for ablation of tumor or mucosal lesion		\$192.49		\$227.17	\$148.72	\$167.3
CPT CODE	4538	5 Colonoscopy, fiberoptic, beyond splenic flexure; for removal of polypoid lesion(s)	100120			-		

	MEAN, MEDIAN, & STANDARD DEVIATION FOR T			Hospitals			A.S.C.s	
				nospitais	Standard		Standard	
SURGICAL				Median	Deviation	Mean	Median	Deviatio
PROCEDURES	APG & CPT DESCRIPTION		Mean	iviedian	Deviation	Ivicaii	Wicdian	Deviation
APG#	166 ERCP & OTHER MISC. GASTROINTESTINAL ENDOSCOPY PROCEDU	RES		1000 00	\$177.90	N.A.	N.A.	N.A.
CPT CODE	43260 Endoscopic retrograde cholangiopan-creatography w/ or w/o bi		\$253.92			\$110.59	\$79.08	\$54.64
CPT CODE	44360 Small intestinal endoscopy beyond second portion of duodenum		\$177.10	\$136.56	\$129.84	\$110.59	\$79.08	934.04
APG#	167 TONSIL & ADENOID PROCEDURES					1010.00	\$232.25	\$201.27
CPT CODE	42821 Tonsillectomy and adenoidectomy, age 12 or over		\$270.95		\$144.98	\$313.83	\$232.25	\$170.8
CPT CODE	42826 Tonsillectomy, primary or secondary age 12 or over		\$265.88	\$259.74	\$135.39	\$282.20	\$232.25	\$170.8
APG#	168 HERNIA & HYDROCELE PROCEDURES						1050.00	4100.0
CPT CODE	49505 Repair inguinal hernia, age 5 or over			\$221.04		\$380.74	\$358.83	\$199.8
CPT CODE	49520 Repair inquinal hernia, any age recurrent		\$247.42	\$223.56	\$123.43	\$332.99	\$307.67	\$169.3
APG#	169 SIMPLE HEMORRHOID PROCEDURES							
CPT CODE	46230 Excision of external hemorrhoid tags and/or multiple papilla		\$184.58		\$124.69	\$275.45	\$282.09	\$156.60
CPT CODE	46934 Description of Hemorrhoids, any method, internal		\$204.80	\$146.87	\$129.17	\$285.13	\$293.64	\$156.00
APG#	170 SIMPLE ANAL & RECTAL PROCEDURES EXCEPT HEMORRHOID PRO	CEDURES						
CPT CODE	45915 Removal of fecal impaction or foreign body (separate procedu		\$184.65		\$85.56	\$133.66	\$133.66	\$77.19
CPT CODE	46200 Fissurectomy, with or without sphincterotomy		\$177.55	\$160.99	\$83.63	\$256.31	\$259.42	\$119.43
APG#	171 COMPLEX ANAL & RECTAL PROCEDURES							
CPT CODE	45170 Excision of Rectal tumor, transanal approach		\$309.49	\$236.96	\$242.19	\$287.31	\$228.41	\$219.2
CPT CODE	46255 Hemorrhoidectomy internal and external, simple		\$212.94	\$161.60	\$109.51	\$337.15	\$356.17	\$198.1
	172 PERITONEAL PROCEDURES & CHANGE OF INTRA-ABDOMINAL TUE	SE .						1
APG#	43760 Change of Gastrostomy Tube		\$96.67	\$76.49	\$70.83	\$126.27	\$115.42	\$76.19
CPT CODE	49080 Peritoneocentesis, abdominal paracentesis, or peritoneal lav		\$135.86	\$91.98	\$105.30	N.A.	N.A.	N.A.
CPT CODE	173 MISC, DIGESTIVE PROCEDURES							
APG#			\$167.61	\$192.49	\$101.77	\$217.66	\$115.42	\$230.40
CPT CODE	43750 Percutaneous placement of gastrostomy tube 49421 Insertion of intraperitoneal cannula or catheter for drainage of dialysi		\$204.47	\$170.80	\$105.71	N.A.	N.A.	N.A.
CPT CODE		s, temporary	1201111					
APG#	183 SIMPLE URINARY STUDIES & PROCEDURES		\$116.62	\$91.82	\$77.74	\$356.17	\$356.17	N.A.
CPT CODE	51720 Bladder instillation of anticarcinogenic agent		\$129.79		\$73.18	N.A.	N.A.	N.A.
CPT CODE	51725 Simple cystometrogram (CMG) (e.g., spinal manometer)		\$124.37	\$112.00	\$70.38	N.A.	N.A.	N.A.
CPT CODE	51736 Simple uroflowmetry (UFR) (e.g., stop-watch flow rate, mechanical	Jronowmeter)	9124.37	7112.00	V/0.50	14171	140.0	+
APG#	184 RENAL EXTRACORPOREAL SHOCK WAVE LITHOTRIPSY		\$211.41	\$228.79	\$153.63	\$973.94	\$973.94	\$114.9
CPT CODE	50590 Lithotripsy, extracorporeal shock wave		\$211.41	9220.73	\$155.05	3373.34	7373.34	V114.5
APG#	185 URINARY CATHETERIZATION & DILATATION		*****	\$146.74	\$39.39	\$419.28	\$419.28	N.A.
CPT CODE	51010 Aspiration of bladder; by trocar or intracatheter with insertion of sup					\$170.95	\$182.05	\$65.27
CPT CODE	53660 Dilation of female urethra including suppository and/or instillation; in	itial		\$117.52	\$100.80	\$33.99	\$33.99	\$12.14
CPT CODE	53670 Catheterization, urethra simple		\$87.83	\$74.15	\$65.22	\$33.99	933.95	912.1
APG#	186 HEMODIALYSIS			L			11.1	N.A.
CPT CODE	90935 Hemodialysis procedure with single physician evaluation		\$278.62	\$258.03	\$111.30	N.A.	N.A.	
CPT CODE	90937 Hemodialysis procedure requiring repeated evaluation(s) with or with	out substantial revision of di	\$328.47	\$328.47	\$142.09	N.A.	N.A.	N.A.
APG#	188 SIMPLE CYSTOURETHROSCOPY							
CPT CODE	52000 Cystourethroscopy (separate procedure)		\$162.75	\$138.62	\$117.44	\$209.61	\$207.42	\$71.7
CPT CODE	52281 Cystourethroscopy, with calibration and/or dilation or urethral strictu	re or stenosis, with(out) me	\$170.64	\$147.37	\$94.15	\$268.77	\$261.38	\$76.4
APG#	189 COMPLEX CYSTOURETHROSCOPY & LITHOLAPAXY							
CPT CODE	52224 Cystourethroscopy, w/ fulguration or treatment of minor lesion(s) wi	th(out) biopsy	\$189.74		\$92.02	\$248.11	\$264.67	\$110.5
CPT CODE	52234 Cystourethroscopy, w/fulguration and/or resection of; small		\$189.65	\$181.12	\$104.20	\$259.94	\$248.64	\$105.6
APG#	190 PERCUTANEOUS RENAL ENDOSCOPY, CATHETERIZATION & URET	ERAL END						
CPT CODE	50392 Introduction of intracatheter or catheter into renal pelvis		\$161.06	\$116.47	\$117.67	N.A.	N.A.	. N.A.
CPT CODE	50393 Introduction of ureteral catheter or stent into ureter through renal pe	lvis for drainage and/or inject	\$191.74	\$203.63	\$69.39	N.A.	N.A.	N.A.
	50953 Ureteral endoscopy through established ureterostomy, with ureteral		\$199.14	\$187.53	\$66.06	\$261.50	\$261.50	N.A.
CPT CODE APG#	191 CYSTOTOMY	South Control of the						

Standard

Deviation

N.A.

\$72,39

\$158.55

\$118.63

\$116.65

ASCe

Median

\$182.43

\$210.31

\$294,55

\$294.64

\$86.27

\$234.55

\$222.37

\$283.07 \$130.72

\$255.54

\$94.55

\$140.76

\$173.10

\$278.86

Hospitals

\$151.58 \$144.77 \$78.98

\$190.12 | \$206.71 | \$88.67

\$186.81 \$165.27 \$128.71

\$185.25 \$147.37 \$139.08 \$282.73

\$195.13 \$166.38 \$118.08 \$129.21

\$212.22 \$162.21 \$149.87 \$246.85

\$188.00 \$151.75 \$116.57 \$249.30

\$190.54 \$162.21 \$111.36

Mean Median

\$158.93 \$123.51

Standard

Deviation

\$94.93 \$182.43

Mean

\$210.31

\$294.55

\$290.62

APG#	193	COMPLEX URETHRAL PROCEDURES						
CPT CODE		Excision or fulguration of carcinoma of urethra		\$179.08	\$147.04	\$249.16	\$249.16	\$106.72
CPT CODE		Excision of urethral diverticulum (separate procedure); male	\$184.82	\$174.33	\$83.78	\$293.06	\$293.06	N.A.
APG#		TESTICULAR EPIDIDYMAL PROCEDURES						
CPT CODE		Orchiectomy, simple, w/ or w/o testicular prosthesis, scrota		\$165.28	\$136.91	\$266.42	\$308.32	\$136.80
CPT CODE		Orchiectomy, simple w/ or w/o testicular prosthesis, scrotal	\$263.09	\$211.30	\$174.00	\$264.98	\$255.57	\$164.00
APG#	210	INSERTION OF PENILE PROSTHESIS						
CPT CODE	54400	Insertion of penile prosthesis; non-inflatable	\$311.93	\$297.52	\$122.18	\$473.50	\$503.66	\$84.89
CPT CODE	54405	Insertion of inflatable (multi-component) penile prosthesis, including placement of pump, cylinder	\$346.81	\$302.98	\$164.87	\$518.26	\$521.43	\$43.50
APG#	211	COMPLEX PENILE PROCEDURES						N.A.
CPT CODE	54402	Removal or replacement of non-inflatable (semi-rigid) or inflatable (self-contained) penile prosthe		\$198.77	\$185.79	N.A.	N.A. \$290.57	\$76.94
CPT CODE	54407	Removal, repair or replacement of inflatable penile prosthesis, including pump and/or reservoir ar	\$240.77	\$216.50	\$178.95	\$283.19	\$290.57	\$70.94
APG#		SIMPLE PENILE PROCEDURES					\$134.18	\$134.32
CPT CODE	54152	Circumcision, clamp procedure except newborn		\$228.07	\$204.97	\$175.34		\$174.47
CPT CODE		Circumcision, surgical excision other than clamp	\$241.72	\$196.41	\$177.29	\$300.46	\$283.23	\$174.47
APG#	213	PROSTATE NEEDLE & PUNCH BIOPSY					1010.00	\$103.11
CPT CODE	55700	Biopsy, prostate needle or punch single or multiple, any app	\$150.14		\$94.05	\$199.85	\$210.08	\$98.66
CPT CODE	55705	Biopsy, prostate incisional, any approach	\$144.42	\$129.50	\$87.44	\$162.65	\$165.75	\$98.66
APG#		TRANSURETHRAL RESECTION OF PROSTATE & OTHER PROSTATE PROCEDURE				1000 10	\$316.47	\$124.49
CPT CODE	52500	Transurethral resection of bladder neck (separate procedure)		\$208.00	\$108.69	\$336.49	\$633.86	N.A.
CPT CODE	52601	Transurethral resection or prostate, including control of postoperative bleeding	\$299.27	\$177.04	\$251.80	\$633.86	\$633.86	N.A.
APG#	237	PROCEDURES FOR PREGNANCY & NEONATAL CARE					1455.04	\$116.14
CPT CODE	59801	Treatment of spontaneous abortion, first trimester, complete	\$163.22	\$141.30	\$113.33	\$181.58	\$155.64	\$119.13
CPT CODE	59820	Treatment of missed abortion, any trimester, completed medic	\$168.82	\$148.44	\$106.36	\$211.39	\$198.39	\$119.13
APG#		THERAPEUTIC ABORTION			100.00	1000 00	4455.64	\$158.56
CPT CODE	59840	Legal (therapeutic ) abortion, by dilation and curettage, an	\$167.09	\$170.55	\$98.66	\$208.86	\$155.64	\$158.56
CPT CODE	59841	Legal (therapeutic) abortion, by dilation and evacuation	\$223.72	\$184.52	\$129.84	\$195.66	\$135.53	\$159.93
APG#	240	FEMALE GENITAL ENDOSCOPY			1		\$343.45	\$209.05
CPT CODE	58980	Laparoscopy for visualization of pelvic viscera	\$310.55	\$237.81	\$194.22	\$374.24		\$169.92
CPT COD':	58985	Laparoscopy for visualization of pelvic viscera, with lysis of adhesions	\$299.51	\$220.81	\$199.94	\$355.84	\$333.33	\$169.92
APG#		COLPOSCOPY				\$281,63	\$257.82	\$200.04
CPT CODE	57452	Colposcopy (vaginoscopy); (separate procedure)		\$184.52	\$148.14			\$162.62
CPT CODE	57454	Colposcopy (vaginoscopy); with biopsies, or biopsy of the cervix	\$199.05	\$148.94	\$112.99	\$211.89	\$159.12	9102.02
APG#		MISC. FEMALE REPRODUCTIVE PROCEDURES			4440.00	\$278.04	\$238,77	\$198.45
CPT CODE	56600	Biopsy of vulva (separate procedure)		\$144.64	\$119.80	\$273.21	\$238.77	\$170.73
CPT CODE	57520	Biopsy of cervix, circumferential (cone) with or without dilation	\$174.57	\$154.03	\$96.76	\$2/3.21	\$252.76	\$170.73

MEAN, MEDIAN, & STANDARD DEVIATION FOR TOTAL INDIRECT COSTS - SURGICAL PROCEDURES

APG & CPT DESCRIPTION

51020 Cystotomy or cystostomy; with fulguration and/or insertion o

51045 Cystostomy w/insertion of ureteral catheter or stent (separate procedure)

51040 Cystostomy; cystotomy with drainage

53265 Excision or fulguration; urethral, caruncle

192 SIMPLE URETHRAL PROCEDURES

243 DILATION & CURETTAGE

57820 Dilation and curettage of cervical stump

244 FEMALE GENITAL EXCISION & REPAIR

57135 Excision of vaginal cyst or tumor

58120 Dilation and curettage, diagnostic and/or therapeutic (nonobstetrical)

56620 Vulvectomy; partial, unilateral or bilateral (less than 80%)

53200 Siopsy of urethra

SURGICAL

CPT CODE

CPT CODE

CPT CODE

CPT CODE

CPT CODE

CPT CODE

APG#

APG#

APG#

PROCEDURES

Standard

ASCS

Hospitals

\$116,15 \$117,70

\$216.13 \$206.71 \$175.96

\$8.90

\$219.99

\$233.51

\$224.84

\$181.54

\$123.50

\$130.09

Standard

65450 Destruction of lesion of cornea by cryotherapy, photocoagulation or thermocauterization

66820 Discussion or secondary membraneous cataract and/or anterior
295 MODERATE ANTERIOR SEGMENT EYE PROCEDURES

MEAN, MEDIAN, & STANDARD DEVIATION FOR TOTAL INDIRECT COSTS - SURGICAL PROCEDURES

SURGICAL

		MEAN, MEDIAN, & STANDARD DEVIATION FOR TOTAL INDIRECT COST		Hospitals			A.S.C.s	
				TTOOPICE	Standard			Standard
SURGICAL		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviatio
ROCEDURES		Iridectomy, w/corneoscleral or corneal section; peripheral of glaucoma (separate procedure)	\$133.25	\$139.53	\$80.30	\$216.58	\$172.31	\$128.26
CPT CODE	66625	Removal of secondary membraneous cataract, with corneoscleral section, with(out) iridectomy	\$162.23	\$113.22	\$108.50	\$221.75	\$221.75	N.A.
OPT CODE	66830	COMPLEX ANTERIOR SEGMENT EYE PROCEDURES EXCEPT FOR GLAUCOMA	TIGETER					
APG#	296	COMPLEX ANTERIOR SEGMENT EYE PROCEDURES EXCEPT FOR GEAGCOMA	\$156,65	\$156.65	\$70,80	\$500.46	\$457.06	\$296.9
CPT CODE	65750	Keratoplasty, penetrating, includes autografts and fresh or preserved grafts	\$289.77	\$240.47	\$223.08	\$369.30	\$219.57	\$346.3
CPT CODE	67010	Removal of vitreous, anterior approach; subtotal removal with mechanical vitrectomy	V203.77	V240.47	7220.00	1000.00	121212	
APG#	297	SIMPLE POSTERIOR SEGMENT EYE PROCEDURES	42E9 06	\$251.21	\$178.93	N.A.	N.A.	N.A.
OPT CODE	67208	Destruction of localized lesion of retina (e.g., maculopathy, choroidopathy, small tumors), one or	4238.00		\$102.27	\$244.95	\$244.95	\$121.3
CPT CODE		Destruction of extensive or progressive retinopathy (e.g., diabetic retinopathy, one or more sessi	\$170.90	\$170.30	0102.27	V244.55	V244.50	V121.0
APG#	298	COMPLEX POSTERIOR SEGMENT EYE PROCEDURES	\$223,35	\$182.78	\$148.39	\$492.72	\$372.67	\$427.3
CPT CODE	67036	Vitrectomy, mechanical, pars plana approach		\$182.78	\$148.39	\$1,077.33	\$1,035.14	\$418.8
CPT CODE	67101	Repair of retinal detachment, one or more sessions, cryotherapy or diathermy, with(out) drainag	\$349.60	\$251.21	\$214.17	\$1,077.33	01,030.14	7410.0
APG#		STRABISMUS & MUSCLE EYE PROCEDURES	1050 10	1001.00	4454.40	\$337.39	\$324.89	\$186.5
CPT CODE		Strabismus surgery on patient not previously operated on, an	\$253.42	\$201.38	\$151.42	\$443.59	\$409.54	\$258.9
CPT CODE	67312	Strabismus surgery on patient not previously operated on; an	\$257.34	\$162.21	\$204.54	\$443.59	\$409.54	\$200.0
APG#	300	SIMPLE REPAIR & PLASTIC PROCEDURES OF EYE				1010.07	4404.05	\$195.6
CPT CODE	67840	Excision of lesion of eye lid without closure or with simple	\$218.11	\$158.32	\$220.11	\$249.27	\$184.65	\$159.9
CPT CODE	67921	Repair of entropion suture	\$263.47	\$181.79	\$295.25	\$359.32	\$395.21	\$159.9
APG#	301	COMPLEX REPAIR & PLASTIC PROCEDURES OF EYE					101010	4070.0
CPT CODE	67904	Repair of blepharoptosis (tarso)-levator resection or advancement, external approach	\$408.77	\$209.69	\$332.10	\$409.51	\$318.16	\$270.3
CPT CODE	68720	Dacryocystorhinostomy (fistulization of lacrimal sac to nasal cavity)	\$560.40	\$481.34	\$383.50	\$675.41	\$679.09	\$421.0
APG#	313	OTORHINOLARYNGOLOGIC FUNCTION TESTS						
CPT CODE	92545	Oscillating tracking test, with recording	\$34.54	\$34.54	N.A.	N.A.	N.A.	N.A.
CPT CODE	92585	Brainstem evoked response recording (evoked response (EEG) audiometry)	\$269.88	\$96.12	\$376.16	N.A.	N.A.	N.A.
APG#	314	MAJOR EXTERNAL EAR PROCEDURES						
CPT CODE	69140	Excision exostosis (es), external auditory canal	\$158.94	\$157.31	\$59.19	\$257.28	\$173.69	\$224.3
CPT CODE	69310	Reconstruction of external auditory canal (meatoplasty), separate procedure	\$251.85	\$208.92	\$132.40	\$454.20	\$454.20	\$293.6
APG#	315	TYMPANOSTOMY & OTHER SIMPLE MIDDLE EAR PROCEDURES						
CPT CODE	69420	Myringotomy including aspiration and/or eustachian tube inflation requiring general anesthesia	\$176.15	\$132.53		\$179.39	\$156.79	\$104.1
OPT CODE	69433	Tympanostomy (requiring insertion of ventilating tube), local or topical anesthesia	\$99.60	\$77.71	\$62.65	\$148.87	\$156.79	\$92.6
APG#	316	TYMPANOPLASTY & OTHER COMPLEX MIDDLE EAR PROCEDURES						
CPT CODE	69631	Tympanoplasty w/o mastoidectomy (including canalplasty, atticotomy and/or middle ear surgery		\$301.43		\$443.89	\$331.16	\$340.4
CPT CODE	69660	Stapedectomy with re-establishment of ossicular continuity, with(out) use of foreign material	\$520.56	\$433.04	\$341.84	\$443.90	\$303.23	\$362.9
APG#	318	SIMPLE AUDIOMETRY						
CPT CODE		8asic comprehensive audiometry	\$51.52	\$43.07	\$32.49	N.A.	N.A.	N.A
CPT CODE		Tympanometry	\$9.03	\$9.21	\$1.47	N.A.	N.A.	N.A.
APG#	319	REMOVAL OF IMPACTED CERUMEN	1					
		Removal impacted cerumen (separate procedure), one or both ears	\$132.99	\$88.77	\$151.80	\$146.43	\$136.39	\$89.4
CPT CODE	09210	Notificed impacted determine (appears presently) and a salitation						
		AGGREGATE MEAN FOR ALL SURGICAL PROCEDURES	\$206.57	\$178.47	\$129.29	\$282.27	\$254.18	\$173.

-	MEAN, N	EDIAN, & STANDARD DEVIATION FOR TOTAL INDIR	ECT COS		RGICAL P	ROCEDU	A.S.C.s	
	1			Hospitals				
SURGICAL					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	134	8LOOD & BLOOD PRODUCT EXCHANGE						
CPT CODE	36455	Exchange transfusion, blood, other than newborn	\$106.58	\$106.58	N.A.	N.A.	N.A.	N.A.
CPT CODE	36520	Therapeutic apheresis (plasma and/or cell exchange)	\$805.67	\$562.74	\$878.04	N.A.	N.A.	N.A.
APG#	136	ALLERGY TESTS AND IMMUNOTHERAPY						
CPT CODE	95001	Percutaneous tests (scratch, puncture, prick) with allergenic extra	\$235.77	\$235.77	N.A.	N.A.	N.A.	N.A.
APG#	187	PERITONEAL DIALYSIS						
CPT CODE	90945	Dialysis procedure other than hemodialysis (eg, peritoneal, hemofil	\$563.41	\$563.41	\$41.56	N.A.	N.A.	N.A.
CPT CODE	90947	Dialysis procedure other than hemodialysis (eg, peritoneal, hemofil	\$798.90	\$798.90	N.A.	N.A.	N.A.	N.A.
APG#	236	PROCEDURES FOR PREGNANCY & NEONATAL CARE		1				
CPT CODE	59025	Fetal non-stress test	\$256.02	\$256.02	N.A.	N.A.	N.A.	N.A.
CPT CODE	59050	Initiation and/or supervision of internal fetal monitoring during labo	\$58.36	\$58.36	N.A.	N.A.	N.A.	N.A.
APG#	262	ELECTROCONVULSIVE THERAPY						
CPT CODE	90870	Electroconvulsive therapy (includes necessary monitoring); single	\$50.07	\$50.07	N.A.	N.A.	N.A.	N.A.
CPT CODE	90871	Electroconvulsive therapy (includes necessary monitoring); multipl	\$50.07	\$50.07	N.A.	N.A.	N.A.	N.A.
APG#	265	SUBDURAL & SUBARACHNOID TAP						
CPT CODE	62225	Replacement or irrigation, ventricular catheter	\$82.65	\$82.65	N.A.	N.A.	N.A.	N.A.
CPT CODE	63744	Replacement, irrigation or revision of lumbosubarachnoid shunt	\$327.13	\$327.13	\$244.21	N.A.	N.A.	N.A.
APG#	268	NEUROSTIMULATOR AND VENTRICULAR SHUNT IMPLANTATION						
CPT CODE		Percutaneous implantation of neurostimulator electrodes; epidural	\$187.38	\$187.38	\$46.58	N.A.	N.A.	N.A.
CPT CODE	64560	Percutaneous implantation of neurostimulator electrodes; autonom	\$154.44	\$154.44	N.A.	\$109.77	\$109.77	N.A.
APG#	287	MINOR OPTHALMOLOGICAL TESTS & PROCEDURES						
CPT CODE	92235	Ophthalmoscopy, with medical diagnostic evaluation; with fluores	\$50.56	\$50.56	N.A.	N.A.	N.A.	N.A.
APG#	317	INNER EAR PROCEDURES						
CPT CODE	69806	Endolymphatic sac operation; with shunt	\$379.53	\$295.71	\$276.70	N.A.	N.A.	N.A.
CPT CODE	69840	Revision fenestration operation	\$154.44	\$154.44	N.A.	\$368.27	\$368.27	N.A.

APG#

APG#

MEA	AN, MEDIAN, S	STANDARD L			TOTAL HADI	NECT COSTS	- JOHGIOAL	.C.s	
			Hos	pitals			A.8	Standard	
SURGICAL				Standard				Deviation	Count
PROCEDURES		Mean	Median	Deviation	Count	Mean	Median	167.54	13
CPT CODE	45378	172.59	159.25	125.76	27	207.39	115.42		
CPT CODE	45380	194.93	177.43	130.16	27	244.23	207.01	171.28	14
APG#	165								
CPT CODE	45383	234.5	213.06	171.38	12	211.68	192.43	126.76	8
CPT CODE	45385	186.28	192.49	117.91	25	227.17	148.72	167.39	14
APG#	166								
CPT CODE	43260	253.92	223.69	177.9	13	N.A.	N.A.	N.A.	
CPT CODE	44360	177.1	136.56	129.84	9	110.59	79.08	54.64	3
APG#	167								
CPT CODE	42821	270.95	258.97	144.98	26	313.83	232.25	201.27	17
CPT CODE	42826	265.88	259.74	135.39	25	282.2	232.25	170.86	15
APG#	168								
CPT CODE	49505	242.45	221.04	130.28	27	380.74	358.83	199.81	19
CPT CODE	49520	247.42	223.56	123.43	26	332.99	307.67	169.32	16
APG#	169								
CPT CODE	46230	184.58	146.87	124.69	11	275.45	282.09	156.6	12
CPT CODE	46934	204.8	146.87	129.17	11	285.13	293.64	156	10
APG#	170	20.10							
CPT CODE	45915	184,65	162.21	85.56	5	133,66	133.66	77.19	2
CPT CODE	46200	177.55	160.99	83,63	13	256.31	259.42	119.43	13
APG#	171	177.33	100.00	00.00					
CPT CODE	45170	309,49	236.96	242.19	11	287,31	228.41	219.27	6
CPT CODE	46255	212.94	161.6	109.51	14	337.15	356.17	198.16	15
	172	212.34	101.0	103.31		007110	000111	100110	
APG#		00.07	76.49	70.83	12	126.27	115.42	76.19	3
CPT CODE	43760	96.67	91.98	105.3	10	N.A.	N.A.	N.A.	
CPT CODE	49080	135.86	91.96	105.3	10	IN.A.	N.A.	14.73.	
APG#	173		100.10	404.77	9	217.66	115.42	230.4	3
CPT CODE	43750	167.61	192.49	101.77		N.A.	N.A.	N.A.	
CPT CODE	49421	204.47	170.8	105.71	6	N.A.	N.A.	IV.A.	
APG#	183					05047	050.47	11.4	-
CPT CODE	51720	116.62	91.82	77.74	6	356.17	356.17	N.A.	1
CPT CODE	51725	129.79	112.95	73.18	7	N.A.	N.A.	N.A.	
CPT CODE	51736	124.37	112	70.38	3	N.A.	N.A.	N.A.	
APG#	184								
CPT CODE	50590	211.41	228.79	153.63	5	973.94	973.94	114.99	2
APG#	185								
CPT CODE	51010	126.79	146.74	39.39	9	419.28	419.28	N.A.	1
CPT CODE	53660	137.36	117.52	100.8	9	170.95	182.05	65.27	3
CPT CODE	53670	87.83	74.15	65.22	8	33.99	33.99	12.14	2
APG#	186								
CPT CODE	90935	278.62	258.03	111.3	4	N.A.	N.A.	N.A.	
CPT CODE	90937	328.47	328.47	142.09	2	N.A.	N.A.	N.A.	
APG#	187								
CPT CODE	90945	563.41	563.41	41.56	2	N.A.	N.A.	N.A.	
CPT CODE	90947	798.9	798.9	N.A.	1	N.A.	N.A.	N.A.	
APG#	188								
CPT CODE	52000	162.75	138.62	117.44	26	209.61	207.42	71.75	14
CPT CODE	52281	170.64	147.37	94.15	23	268.77	261.38	76.44	8

K-18

CPT CODE

50.56

50.56

MEA	N, MEDIAN, S	STANDARD E			TOTAL INDI	RECT COSTS				
			Hos	pitals		A.S.C.s				
SURGICAL				Standard				Standard		
PROCEDURES		Mean	Median	Deviation	Count	Mean	Median	Deviation	Count	
APG#	315									
CPT CODE	69420	176.15	132.53	127.81	13	179.39	156.79	104.14	11	
CPT CODE	69433	99.6	77.71	62.65	9	148.87	156.79	92.69	11	
APG#	316									
CPT CODE	69631	363.89	301.43	287.9	11	443.89	331.16	340.42	8	
CPT CODE	69660	520.56	433.04	341.84	8	443.9	303.23	362.92	4	
APG#	317									
CPT CODE	69806	379.53	295.71	276.7	3	N.A.	N.A.	N.A.		
CPT CODE	69840	154.44	154.44	N.A.	1	368.27	368.27	N.A.	1	
APG#	318				-					
CPT CODE	92557	51.52	43.07	32.49	5	N.A.	N.A.	N.A.		
CPT CODE	92567	9.03	9.21	1.47	5	N.A.	N.A.	N.A.		
APG#	319									
CPT CODE	69210	132.99	88.77	151.8	6	146.43	136.39	89.46	5	

## APPENDIX L D MEANS FOR 1

PERCENTILES AND MEANS FOR INDIRECT LABOR, INDIRECT EQUIPMENT AND OVERHEAD COSTS AMBULATORY SURGERY

		MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT LABOR COSTS - S		Hospitals			A.S.C.s	
				Troopitore	Standard			Standard
SURGICAL		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
PROCEDURES								
APG#	2	SUPERFICIAL NEEDLE BIOPSY & ASPIRATION	\$19.45	\$10,65	\$15.92	\$30.29	\$17.42	\$32.80
CPT CODE		Puncture Aspiration of Cyst of Breast	\$43.01	\$29.45	\$33.39	\$55.89	\$39.19	\$40,69
CPT CODE		Biopsy of breast, needle (separate procedure)	\$29.45	\$29.45	N.A.	\$149.11	\$149.11	N.A.
CPT CODE		Biopsy, thyroid, percutaneous needle	723,73	923.40	14.751	*********	******	
APG#	3	SIMPLE INCISION & DRAINAGE	\$23.29	\$16.93	\$18.76	\$37.67	\$24.89	\$38.34
CPT CODE		Incision and drainage of infected or noninfected sebaceous cyst	\$23.29	\$18.63	\$18.93	\$24.01	\$22.56	\$11.75
CPT CODE	10060	Incision and drainage of abscess (e.g., carbuncle)	\$23.97	\$16.03	\$19.51	\$54.36	\$26.14	\$5B.76
CPT CODE	10120	Incision & removal of foreign body subcutaneous tissues; simple	\$21.95	\$16.35	\$19.51	934.30	920.14	900.70
APG#	4	COMPLEX INCISION AND DRAINAGE	107.15	100.10	\$2B.72	\$B7.06	\$57.41	\$93.01
CPT CODE		Incision and drainage of hematoma; complicated	\$37.15	\$28.46			\$35,49	\$93.01
CPT CODE	101B0	Incision and drainage, complex, post-operative wound infection	\$38.49	\$28.46	\$29.07	\$86.30		\$16.01
CPT CODE	23931	Incision and drainage, upper arm or elbow area; infected bur	\$32.37	\$23.96	\$32.19	\$35.32	\$38.31	
CPT CODE	2B002	Deep dissection below fascia, for deep infection of foot, with(out) tendon sheath involvement; single bur	\$29.26	\$21.69	\$24.42	\$59.15	\$2B.77	\$73.33
APG#	5	COMPLEX INCISION AND DRAINAGE						
CPT CODE	11700	Debridement of nails, manual; five or less	\$21.21	\$14.91	\$16.46	\$29.4B	\$23.06	\$24.13
CPT CODE		Debridement of nails, manual each additional; five or less	\$26.62	\$15.37	\$24.53	\$39.3B	\$26.16	\$41.44
APG#	6	SIMPLE DEBRIDEMENT & DESTRUCTION						
CPT CODE	11040	Debridement of skin, partial thickness	\$25.63	\$18.82	\$19.98	\$45.32	\$33.11	\$31.62
CPT CODE		Avulstion of nail plate, partial or complete, simple; single	\$1B.38	\$14.91	\$14.01	\$28.50	\$18.BB	\$33.61
CPT CODE	17000	Destruction by any method, with or without surgical curettement	\$26.66	\$12.6B	\$32.60	\$43.91	\$32.12	\$33.83
CPT CODE	20670	Removal of implant superficial, (e.g., buried wire, pin or rod	\$31.09	\$23.B7	\$27.30	\$B2.37	\$43.42	\$100.00
APG#	7	SIMPLE EXCISION & BIOPSY			-			
CPT CODE		Excision, benign lesion, except skin tag, trunk, arms or leg	\$18.98	\$10.57	\$18.83	\$59.98	\$34.50	\$62.86
CPT CODE	11440	Excision, other benign lesion (unless listed elsewhere); face, ears, eyelids, nose, lips, mucous membrane;	\$22.32	\$13.36	\$21.33	\$55.97	\$32.19	\$59.82
CPT CODE	11601	Excision, malignant lesion; trunk, arms or legs; lesion diameter .6 - 1.0 cm	\$21.87	\$18.82	\$18.38	\$48.77	\$32.98	\$41.03
CPT CODE		Excision, malignant lesion, face, ears, eyelids, nose, lips;	\$23.37	\$14.61	\$21.29	\$48.26	\$33.43	\$42.39
	8	COMPLEX EXCISION, BIOPSY & DEBRIDEMENT						
APG#		Excision, benign lesion, except skin tag (unless listed else	\$24.99	\$16.35	\$20.79	\$59.45	\$39.03	\$56.52
CPT CODE	11404	Excision, benign lesion, except skin tag (unless listed else	\$25.04	\$16.97	\$20.83	\$63.13	\$34.50	\$59.06
CPT CODE	11406	Excision, malignant, lesion, face, ears, eyelids, nose, lips	\$29.28	\$20.30	\$24.65	\$48.26	\$34.08	\$43.14
CPT CODE		LIPECTOMY & EXCISION WITH RECONSTRUCTION	1-1-1-1					
APG#	9		\$43.58	\$31.95	\$36.68	\$87.46	\$55.98	\$72.24
CPT CODE		Excision, excessive skin and subcutaneous tissue	\$55.76	\$39.03	\$49,17	\$80.17	\$58,94	\$68.76
CPT CODE	15972	Excision, leg pressure ulcer, with local skin flap(s)	\$98.10	\$71.28	\$70.84	\$122.14		\$125.15
CPT CODE		Ligation and division and completion of strip. of long or short saphenous veins with radical excision of ul	¥50.10	471120	170.0.			
APG#	10	SIMPLE SKIN REPAIR	\$18.70	\$12.59	\$18.23	\$67.65	\$32,98	\$75.89
CPT CODE		Simple repair of superficial wounds of scalp, neck, axillae	\$23.61	\$14.89	\$29.44	\$73.30	\$30.29	\$81.45
CPT CODE ·	12002	Simple repair of superficial wounds of scalp, neck, axillae,	\$33.42	\$24.28	\$28.59	\$84.73	\$32.90	\$102.66
CPT CODE		Layer closure of wounds of scalp axillae, trunk and/or extremities (excluding hands and feet); 2.5cm or l	933.42	924.20	720.03	704.73	402.00	4102.00
APG#	, 11	COMPLEX SKIN REPAIR	\$30.96	\$21.69	\$24.92	\$44.01	\$29.87	\$39.11
CPT CODE		Simple repair or superficial wounds of face, ears, eyelids,		\$25.11	\$33.50	\$60.26	\$32.98	\$64.86
CPT CODE	12017	Simple repair or superficial wounds of face, ears, eyelids,	\$40.67		\$41.32	\$61,11	\$29.83	\$75.12
CPT CODE		Layer closure of wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.5cm or less	\$51.85	\$39.72			\$67.85	\$48.13
CPT CODE	15B22	Blepharoplasty, upper eyelid	\$49.40	\$29.16	\$46.27	\$83.38	907.85	940.13
APG#	. 12	SKIN & INTEGUMENT GRAFT, TRANSFER & REARRANGEMENT	1110	100.5-	440.45	A444 71	A71 25	\$114.97
CPT CODE	14060	Adjacent tissue transfer or rearrangement, eyelids, nose, ears and/or lips; defect 10 sq. cm or less	\$44.01	\$30.62	\$43.15	\$114.74	\$71.35	
CPT CODE	15100	Split graft, trunk, scalp, arms, legs, hands, and/or feet; 1	\$61.96	\$45.86	\$47.07	\$94.49	\$78.54	\$69.59
CPT CODE	15260	Full thickness graft, free, including direct closure of donor	\$60.16	\$37.78	\$55.82	\$104.02	\$64.10	\$64.24
APG#		SIMPLE INCISION & EXCISION OF BREAST						

		MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT LABOR COSTS - S		Hospitals		A.S.C.s			
				Hospitals	Standard		A.S.C.8	Standard	
SURGICAL			Mean	Median	Deviation	Mean	Median	Deviation	
PROCEDURES		APG & CPT DESCRIPTION	\$26.74	\$18.82	\$25.21	\$65,63	\$61.40	\$39.02	
CPT CODE		Biopsy of breast, incisional			\$27.23	\$90.53	\$66.53	\$87.78	
CPT CODE		Excision or cyst, fibroadenoma, or other benign or malignant	\$30.38	\$18.72	\$21.23	\$90.53	\$00.03	907.70	
APG#	28	BREAST RECONSTRUCTION & MASTECTOMY	\$50.72	\$39.08	\$48.54	\$79.26	\$63.65	\$47.65	
CPT CODE		Mastectomy for gynecomastia through circular or other incision			\$50.65	\$84.60	\$72.56	\$59.25	
CPT CODE		Mastectomy, partial	\$55.90 \$43.92	\$34.00	\$41,94	\$113.30	\$86.76	\$99.73	
CPT CODE		Mastectomy, subcutaneous	\$43.92	\$34.00	\$41.94	\$113.30	\$80.70	\$33.73	
APG#		OCCUPATIONAL THERAPY	15.00	40.00	\$4.94	N.A.	N.A.	N.A.	
CPT CODE	97540	Training in activities of daily living (self care skills and	\$5.03	\$3.83	\$4.65		N.A.	N.A.	
CPT CODE		Training in activities of daily living (self care skills and	\$3.83	\$1.74	\$4.65	N.A.	N.A.	IN.A.	
APG#		PHYSICAL THERAPY	10.11	14.70	40.70	A1.A	A/ A	N.A.	
CPT CODE		Physical medicine treatment to one area hot or cold packs	\$3.44	\$1.73	\$3.78	N.A.	N.A.	N.A.	
CPT CODE		Physical medicine treatment to one area, initial 30 minutes,	\$2.15	\$1.16	\$2.51	N.A.	N.A.	N.A.	
APG#		DIAGNOSTIC ARTHROSCOPY					104.00	400.00	
CPT CODE	29815	Arthroscopy, shoulder, diagnostic, with(out) synovial biopsy (separate procedure)	\$40.36	\$35.15	\$22.98	\$87.43	\$61.28	\$88.89	
CPT CODE		Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)	\$30.42	\$23.37	\$21.35	\$106.10	\$71.02	\$98.09	
APG#		THERAPEUTIC ARTHROSCOPY				111010	100 54	10100	
CPT CODE	29877	Arthroscopy, knee, surgical debridement/shaving of cartilage (chondroplasty)	\$29.01	\$18.62	\$26.83	\$112.40	\$82.51	\$94.03	
CPT CODE		Arthroscopy, knee, surgical with meniscectomy (medical or lateral including any meniscal shaving)	\$36.65	\$31.97	\$35.95	\$127.87	\$91.54	\$107.46	
APG#		REPLACEMENT OF CAST					100 51	104.40	
CPT CODE	29075	Application elbow to finger (short arm)	\$21.09	\$17.28	\$19.17	\$63.02	\$20.54	\$91.49	
CPT CODE	29405	Application	\$28.88	\$15.11	\$29.63	\$72.05	\$39.19	\$87.01	
APG#	58	SPLINT, STRAPPING & CAST REMOVAL							
CPT CODE	29125	Application of short arm splint (forearm to hand); static	\$22.37	\$19.00	\$19.34	\$61.63	\$29.86	\$81.90	
CPT CODE	29580	Strapping unna boot	\$8.90	\$7.51	\$9.21	\$20.96	\$20.96	N.A.	
APG#	59	TREATMENT OF CLOSED FRACTURE & DISLOCATION OF FINGER, TOE & RIB						-	
CPT CODE	21800	Treatment of rib fracture, closed, uncomplicated, each	\$32.69	\$19.58	\$33.66	N.A.	N.A.	N.A.	
CPT CODE	26720	Treatment of closed phalangeal shaft fracture, proximal or m	\$20.81	\$16.97	\$17.87	\$35.33	\$25.07	\$26.08	
APG#		TREATMENT OF CLOSED FRACTURE & DISLOCATION EXCEPT FINGER, TOE & RIB						-	
CPT CODE	25600	Treatment of closed distal radial fracture (e.g., Colles or Smith type) or epiphyseal separation, with(out)	\$31.48	\$26.57	\$24.38	\$62.16	\$38.12	\$56.10	
CPT CODE	25605	Treatment of closed distal radial fracture (e.g., Colles or Smith type) or epiphyseal separation, with(out)	\$24.14	\$16.91	\$21.40	\$45.84	\$30.82	\$34.10	
CPT CODE	28470	Treatment of closed metatarsal fracture without manipulation	\$26.57	\$12.44	\$23.99	\$24.69	\$20.54	\$16.86	
APG#	62	TREATMENT OF OPEN FRACTURE & DISLOCATION EXCEPT FACE			1			-	
CPT CODE	25615	Treatment of open distal radial fracture (e.g., Colles or Smith	\$59.41	\$47.98	\$50.39	\$100.99	\$58.94	\$91.29	
CPT CODE		Open treatment of closed or open distal radial fracture (e.g.,	\$51.40	\$34.58	\$50.80	\$81.64	\$56.40	\$65.51	
CPT CODE	26735	Open treatment of closed or open phalangeal shaft fracture	\$49.76	\$32.46	\$46.28	\$122.73	\$54.30	\$162.16	
APG#	63	JOINT MANIPULATION UNDER ANESTHESIA	-						
CPT CODE	23700	Manipulation under anesthesia, shoulder joint, including app	\$21.70	\$15.86	\$21.19	\$48.66	\$40.34	\$37.40	
CPT CODE	27570	Manipulation of knee joint under general anesthesia (include	\$21.18	\$13.77	\$20.13	\$39.17	\$27.68	\$25.63	
APG#		SIMPLE MAXILLOFACIAL PROCEDURES							
CPT CODE	30000	Drainage of hematoma, nasal, internal approach	\$29.50	\$24.38	\$24.00	\$42.56	\$25.07	\$39.90	
CPT CODE	30110	Excision, nasal polyp(s), simple unilateral	\$35.43	\$33.55	\$23.28	\$64.20	\$38.12	\$74.35	
CPT CODE		Excision, nasal polyp(s), simple bilateral	\$45.07	\$40.91	\$25.10	\$50.17	\$37.11	\$43.02	
CPT CODE		Sinusotomy, maxillary (antrotomy); intranasal, unilateral	\$42.64	\$38.52	\$27.15	\$96.06	\$54.21	\$94.22	
APG#	65	COMPLEX MAXILLOFACIAL PROCEDURES							
CPT CODE		Septoplasty or submucous resection, with or without cartilage scoring, contouring or replacement with g	\$42.76	\$40.71	\$28.05	\$114.86	\$84.75	\$106.09	
CPT CODE		Reconstruction, functional, internal nose (septal or other intranasal dermatoplasty)	\$38.86	\$33.02	\$27.93	\$100.55	\$62.62	\$81.05	
APG#	66	INCISION OF BONE, JOINT, & TENDON							
CPT CODE		Tendon sheath incision at radial styloid for deQuervain's disease	\$28.61	\$18.62	\$27.18	\$77.61	\$52.86	\$72.21	

		MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT LABOR COSTS - S	011010711	Hospitals		A.S.C.s			
				Hospitals	Standard		M.3.0.3	Standard	
SURGICAL			Mean	Median	Deviation	Mean	Median	Deviation	
PROCEDURES		APG & CPT DESCRIPTION		\$18.82	\$37.18	\$118.46	\$52.86	\$131.40	
CPT CODE	28270	Capsulotomy for contracture; metatarso-phalangeal joint, with(out) tenorrhaphy, single, joint, each joint (	\$37.20	\$18.82	937.10	\$110.40	432.00	V131.40	
APG#	67	BUNION PROCEDURES	\$40,31	\$38.32	\$27.30	\$120,66	\$89.94	\$117.92	
CPT CODE	28290	Hallux valgus (bunion) correction, with or without sesamoidectomy; simple exostectomy (Silver type pro		\$29.82	\$31.78	\$107.84	\$53.79	\$105.17	
CPT CODE	28292	Hallux valgus (bunion) correction, with or without sesamoidectomy; simple exostectomy (Keller, Mcbride	\$40.23	\$29.82	\$31.78	\$107.84	903.75	7100.17	
APG#	68	EXCISION OF 80NE, JOINT & TENDON OF THE HAND & FOOT	100.05	410.01	\$23,66	\$76,53	\$49.21	\$68.08	
CPT CODE		Excision or lesion of tendon sheath or capsule (e.g., cyst, mucous cyst, ganglion), hand or finger	\$28.35	\$18.61	\$31.62	\$89.71	\$57.16	\$90.23	
CPT CODE	28080	Excision of interdigital (Morton) neuroma, single, each	\$35.54	\$21.77	\$31.62	\$89.71	\$57.10	950.23	
APG#	69	EXCISION OF BONE , JOINT & TENDON EXCEPT HAND & FOOT		100.00	\$24.79	\$77.67	\$36.34	\$77.16	
CPT CODE	24105	Excision, olecranon bursa	\$30.02	\$23.29			\$48.39	\$68.85	
CPT CODE	27345	Excision of synovial cyst of popiteal space (8aker's cyst)	\$33.58	\$25.63	\$24.93	\$72.46	\$48.39	\$68.85	
APG#	70	ARTHROPLASTY					100.10	\$44.31	
CPT CODE	25447	Interposition arthroplasty, intercarpal or carpometacarpal joints	\$46.40	\$32.51	\$63.42	\$60.99	\$39.19		
CPT CODE		Arthroplasty interphalangeal joint; single, each	\$31.45	\$20.17	\$29.66	\$42.97	\$34.37	\$24.76	
APG#	71	HAND & FOOT TENOTOMY							
CPT CODE	26455	Tenotomy, flexor, single, finger open, each	\$26.93	\$17.98	\$24.80	\$80.36	\$59.13	\$79.38	
CPT CODE		Tenotomy, open, extensor, foot or toe	\$32.65	\$23.37	\$28.49	\$68.57	\$27.68	\$95.93	
APG#	72	SIMPLE HAND & FOOT REPAIR EXCEPT TENOTOMY		1					
CPT CODE		Tendon sheath incision for trigger finger	\$21.58	\$13.52	\$20.28	\$72.89	\$48.30	\$74.78	
CPT CODE	28285	Hammertoe operation, one tow (e.g., interphalangeal fusion, filleting, phalangectomy)	\$33.45	\$20.26	\$30.52	\$103.17	\$45.43	\$111,45	
APG#	73	COMPLEX HAND & FOOT REPAIR							
CPT CODE		Arthrodesis, interphalangeal joint; with or w/o internal fix	\$53.77	\$38.80	\$41.99	\$126.54	\$58.70	\$147.39	
CPT CODE		Amputation, metatarsal, with toe, single	\$26.52	\$22.13	\$20.96	\$53.28	\$36.81	\$37.91	
APG#	74	REPAIR, EXCEPT ARTHROTOMY, OF 80NE, JOINT, TENDON EXCEPT OF HAND & FOOT							
CPT CODE	22420	Repair of complete shoulder (rotator) cuff avulsion, chronic	\$71.57	\$61.71	\$53.65	\$141.51	\$129.16		
CPT CODE		Repair, tendon or muscle, flexor, forearm and/or wrist; prim	\$37.37	\$28.73	\$28.15	\$100.17	\$68.79	\$85.84	
APG#	75	ARTHROTOMY EXCEPT OF HAND & FOOT		1					
CPT CODE	27222	Arthrotomy, knee, for excision of semilunar cartilage (meniscectomy); medial or lateral	\$40.25	\$31.41	\$36.26	\$43.57	\$44.39	\$16.27	
CPT CODE	27332	Arthrotomy, knee, for excision of semilunar cartilage (meniscectomy); medial and lateral	\$42.57	\$34.00	\$25.17	\$46.18	\$49.61	\$17.05	
	76	ARTHROCENTESIS & LIGAMENT OR TENDON INJECTION							
APG#		Injection, tendon sheath, ligament, trigger points or ganglion cyst	\$31.25	\$11.75	\$41.40	\$65.59	\$56.98	\$49.58	
CPT CODE	20550	Arthrocentesis, aspiration and/or injection; intermediate joint, bursa or ganglion cyst	\$23.03	\$13.95	\$23.07	\$44.30	\$28.00	\$45.02	
CPT CODE		Arthrocentesis, aspiration and/or injection; major joint or bursa	\$25.40	\$13.95	\$25.73	\$37.38	\$24.89	\$37.74	
CPT CODE	77	SPEECH THERAPY						1	
APG#	//	Speech, language or hearing therapy, with continuing medical supervision; group	\$7,45	\$2.44	\$9.24	N.A.	N.A.	N.A.	
CPT CODE	92507	Speech, language or hearing therapy, with continuing medical supervision; individual	\$1.07	\$1.07	\$1.28	N.A.	N.A.	N.A.	
CPT CODE		PULMONARY TEST & THERAPY EXCEPT SPIROMETRY							
APG#	79	Intermittent positive pressure breathing (IPP8) treatment, a	\$0.96	\$0.39	\$1.06	N.A.	N.A.	N.A.	
CPT CODE			\$0.95	\$0.41	\$1.69	N.A.	N.A.	N.A.	
CPT CODE		Noninvasive ear or pulse oximetry for oxygen saturation; sin NEEDLE & CATHETER BIOPSY, ASPIRATION, LAVAGE & INTUBATION	10.00						
APG#	80		\$39.92	\$32.30	\$28,28	\$30,29	\$30.29	N.A.	
CPT CODE		Thoracentesis, puncture or pleural cavity for aspiration, in	\$59.15	\$54.21	\$48.44	N.A.	N.A.	N.A.	
CPT CODE		Biopsy, lung or mediastinum, percutaneous needle	400110	10	1	1			
APG#	81	SIMPLE ENDOSCOPY OF THE UPPER AIRWAY	\$25.19	\$24.33	\$17.44	\$56,30	\$35.73	\$54.62	
CPT CODE		Laryngoscopy, indirect (separate procedure); diagnostic	\$22.96	\$17.26	\$15.55	\$52.82	\$25.30	\$56.40	
CPT CODE		Laryngoscopy, indirect (separate procedure) with biopsy	422.30	V17.20	415.50	752.52	· *20.00	1	
APG#	B2	COMPLEX ENDOSCOPY OF THE UPPER AIRWAY	\$31.15	\$23.28	\$24.63	\$55.10	\$48.30	\$35.78	
CPT CODE		Laryngoscopy, direct, operative with biopsy	\$36.98	\$34.35	\$27.58	\$67.37	\$60.81	\$40.14	
CPT CODE		Laryngoscopy, direct, operative, with excision of tumor, w/o	V00.50	V-4.33	727.00	+57.07		1.7011	
APG#	83	SIMPLE ENDOSCOPY OF THE LOWER AIRWAY							

	MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT LABOR COSTS - S		Hospitals		A,S.C.s		
-			Tiospituis	Standard		11101010	Standar
SURGICAL	APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviatio
PROCEDURES		\$26.97	\$26.97	\$11.07	\$34.47	\$34.47	N.A.
CPT CODE	51020 Cystotomy or cystostomy; with fulguration and/or insertion o	\$43.77	\$31.69	\$39.81	\$64,73	\$64,73	\$48.71
CPT CODE	51040 Cystostomy; cystotomy with drainage	\$45,65	\$40.00	\$34.61	\$93.35	\$93.35	\$83,27
CPT CODE	51045 Cystostomy w/insertion of ureteral catheter or stent (separate procedure)	V40.00	740.00	10-1101	100.00	100.00	
APG#	192 SIMPLE URETHRAL PROCEDURES	\$27.25	\$23,95	\$15.74	\$54.83	\$37.99	\$46.41
CPT CODE	53200 Biopsy of urethra	\$32.20	\$24.69	\$25.03	\$51.95	\$37.99	\$40,85
CPT CODE	53265 Excision or fulguration; urethral, caruncle	\$32.20	\$24.09	\$25.03	701.50	737.33	V40.00
APG#	193 COMPLEX URETHRAL PROCEDURES	405.05	\$24.69	\$12,01	\$77.58	\$77,58	\$63.18
CPT CODE	53220 Excision or fulguration of carcinoma of urethra	\$25.25			\$110.71	\$110,71	N.A.
CPT CODE	53235 Excision of urethral diverticulum (separate procedure); male	\$31.38	\$31.89	\$10.89	\$110.71	\$110.71	IV.A.
APG#	209 TESTICULAR EPIDIDYMAL PROCEDURES		10000	400.04	450.00	400.07	\$44.48
CPT CODE	54520 Orchiectomy, simple, w/ or w/o testicular prosthesis, scrota	\$32.76	\$27.96	\$28.24	\$58.89	\$36.67	\$54.48
CPT CODE	54521 Orchiectomy, simple w/ or w/o testicular prosthesis, scrotal	\$42.56	\$31.16	\$47.54	\$68.51	\$46.72	\$54.95
APG#	210 INSERTION OF PENILE PROSTHESIS						+05.70
CPT CODE	54400 Insertion of penile prosthesis; non-inflatable	\$50.49	\$49.46	\$19.19		\$141.26	\$65.70
CPT CODE	54405 Insertion of inflatable (multi-component) penile prosthesis, including placement of pump, cylinders, and/o	\$61.76	\$49.46	\$40.46	\$117.81	\$113.19	\$68.08
APG#	211 COMPLEX PENILE PROCEDURES				ļ		
CPT CODE	54402 Removal or replacement of non-inflatable (semi-rigid) or inflatable (self-contained) penile prosthesis	\$52.40	\$35.15	\$47.23	N.A.	N.A.	N.A.
CPT CODE	54407 Removal, repair or replacement of inflatable penile prosthesis, including pump and/or reservoir and/or cyli	\$52.70	\$42.58	\$46.69	\$65.00	\$38.12	\$60.08
APG#	212 SIMPLE PENILE PROCEDURES						
CPT CODE	54152 Circumcision, clamp procedure except newborn	\$41.18	\$37.71	\$28.70	\$43.20	\$32.06	\$42.48
CPT CODE	54161 Circumcision, surgical excision other than clamp	\$28.46	\$25.39	\$23.71	\$77.79	\$56.22	\$73.07
APG#	213 PROSTATE NEEDLE & PUNCH BIOPSY						
CPT CODE	55700 Biopsy, prostate needle or punch single or multiple, any app	\$17.07	\$12.93	\$13.08	\$45.89	\$30.82	\$38.32
CPT CODE	55705 Biopsy, prostate incisional, any approach	\$25.90	\$20.36	\$19.10	\$32.86	\$25.66	\$28.38
APG#	214 TRANSURETHRAL RESECTION OF PROSTATE & OTHER PROSTATE PROCEDURE				1		
CPT CODE	52500 Transurethral resection of bladder neck (separate procedure)	\$38.18	\$32.77	\$31.21	\$76.65	\$57.41	\$54.23
CPT CODE	52601 Transurethral resection or prostate, including control of postoperative bleeding	\$44.02	\$37.31	\$34.38	\$235.26	\$235.26	N.A.
APG#	237 PROCEDURES FOR PREGNANCY & NEONATAL CARE						
CPT CODE	59801 Treatment of spontaneous abortion, first trimester, complete	\$16.53	\$13.77	\$11.94	\$58.62	\$32.18	\$51.55
CPT CODE	59820 Treatment of missed abortion, any trimester, completed medic	\$16.15	\$14.79	\$10.36	\$62.95	\$48.48	\$50.40
	238 THERAPEUTIC ABORTION						
APG#	59840 Legal (therapeutic ) abortion, by dilation and curettage, an	\$21.47	\$9.89	\$24.59	\$60.90	\$49.46	\$54.51
CPT CODE	59841 Legal (therapeutic) abortion, by dilation and evacuation	\$20.72	\$10.23	\$29.02	\$63.95	\$35,47	\$75.40
CPT CODE							
APG#	240 FEMALE GENITAL ENDOSCOPY	\$38.13	\$33.06	\$28.81	\$100.12	\$86.54	\$79.05
CPT CODE	58980   Laparoscopy for visualization of pelvic viscera   58985   Laparoscopy for visualization of pelvic viscera, with lysis of adhesions	\$39.61	\$29.09	\$32.60	\$103.29		\$85.54
CPT CODE		400.01	420.00	102100		10010	10000
APG# .	241 COLPOSCOPY	\$33.34	\$16.97	\$31,87	\$68,42	\$32.08	\$77,65
CPT CODE	57452 Colposcopy (vaginoscopy); (separate procedure)	\$33.55	\$18.57	\$34.94	\$28.67	\$27.31	\$15.2
CPT CODE	57454 Colposcopy (vaginoscopy); with biopsies, or biopsy of the cervix	433.00	710.57	V34.54	V20.07	V27.51	- TIOIL
APG#	242 MISC. FEMALE REPRODUCTIVE PROCEDURES	\$26.96	\$16.97	\$23,27	\$67.06	\$34.50	\$66.12
CPT CODE	56600 Biopsy of vulva (separate procedure)	\$24.04	\$18.57	\$21.15	\$70,71	\$41.01	\$61,09
CPT CODE	57520 Biopsy of cervix, circumferential (cone) with or without dilation	VZ4.04	V10.07	V2 1.10	770171	7-71.01	+5170
APG#	243 DILATION & CURETTAGE	\$22.28	\$13.07	\$21.74	\$42.66	\$17.23	\$49.84
CPT CODE	57820 Dilation and curettage of cervical stump	\$22.28	\$13.07	\$21.74	\$70.09	\$56.84	\$63.66
CPT CODE	58120 Dilation and curettage, diagnostic and/or therapeutic (nonobstetrical)	92U.18	\$13.16	921./3	\$70.09	930.84	903.00
APG#	244 FEMALE GENITAL EXCISION & REPAIR	\$32.76	\$35,15	\$32.57	\$55.21	\$34.50	\$40.03
CPT CODE	56620 Vulvectomy; partial, unilateral or bilateral (less than 80%)	\$32.76	\$35.15	\$23.41	\$72.79	\$34.50	\$78.91
CPT CODE	57135 Excision of vaginal cyst or tumor	930.07	\$25.78	923.41	\$12.19	1 937.31	9/0.9

		MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT LABOR COSTS - SI		Hospitals		A.S.C.s		
				тоори	Standard			Standard
SURGICAL		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
PROCEDURES								
APG#	261	ELECTROENCEPHALOGRAM Electroencephalogram (EEG) including recording awake, drowsy	\$71.93	\$23.96	\$162.50	N.A.	N.A.	N.A.
CPT CODE	95819	Electroencephalogram (EEG) including recording awake, gloways	\$40.18	\$40.18	\$55.73	N.A.	N.A.	N.A.
CPT CODE	95828	Polysomnography (recording, analysis and interpretation of t						
APG#	263	NERVE & MUSCLE TESTS	\$22.82	\$22.82	\$27.12	N.A.	N.A.	N.A.
CPT CODE	95900	Nerve conduction, velocity and/or latency study; motor, each nerve	\$16.21	\$3.64	\$22.33	N.A.	N.A.	N.A.
CPT CODE	95904	Nerve conduction, velocity and/or latency study; sensory, each nerve	7.0.0.	10.0				
APG#	264	INJECTION OF SUBSTANCE INTO SPINAL CORD	\$20.27	\$15.72	\$17.24	\$46.55	\$25.57	\$43.67
CPT CODE	62278	Injection of anesthetic substance (including narcotics), diagnostic or therapeutic epidural, lumbar, caudal,	\$24.70	\$24.70	\$19.42	\$40.80	\$40.99	\$20.92
CPT CODE		Injection of substance other than anesthetic, contrast, or n	V24.70	724.70	410112			
APG#	266	NERVE INJECTION & STIMULATION	\$31.26	\$26.06	\$15.36	\$64.90	\$39.97	\$56.40
CPT CODE	64510	Injection, anesthetic agent; stellate ganglion (cervical sympathetic)	\$19.51	\$16.58	\$14.03	\$92.20	\$25.57	\$121.83
CPT CODE	64520	Injection, anesthetic agent; lumbar or thoracic (paravertebral, sympathetic)	V10.01	7,0,00	7.7.00			
APG#		REVISION & REMOVAL OF NEUROLOGICAL DEVICE	\$36.22	\$36.22	\$19.48	\$22,46	\$22.46	N.A.
CPT CODE		Revision or removal of spinal neurostimulator electrodes	\$28.86	\$21.17	\$18.52	\$38.12	\$38.12	N.A.
CPT CODE		Revision or removal of spinal neurostimulator receiver	920.00	921.17	910.52	V30.12	400.12	141741
APG#		CARPAL TUNNEL RELEASE	\$30.68	\$19.42	\$29.27	\$90.64	\$59.77	\$86,22
CPT CODE		Neuroplasty and/or transposition; median nerve at carpal tun	\$30.08	919.42	923.21	750.04	¥33.77	400122
APG#		NERVE REPAIR & DESTRUCTION	\$47.81	\$39.38	\$42,07	\$143.93	\$72.93	\$151.71
CPT CODE	64718	Neuroplasty and/or transposition ulnar nerve at elbow	\$61.04	\$45.08	\$55.43	\$119.29	\$49.36	\$141.17
CPT CODE		Neuroplasty and/or transposition; ulnar nerve at wrist	\$61.04	\$45.08	955.43	9113.23	945.30	V141.17
APG#		COMPLEX NERVE REPAIR	454.40	\$28.20	\$41.33	\$91.70	\$41.13	\$99.82
CPT CODE	64831	Suture of digital nerve, hand or foot; one nerve	\$51.12	\$36.18	\$42.71	\$86.64	\$58.06	\$72.31
CPT CODE	64834	Suture of one nerve, hand or foot; common sensory nerve	\$55.53	\$30.18	\$42.71	\$80.04	\$00.00	972.51
APG#		SPINAL TAP	440.07	\$19.48	\$9.41	N.A.	N.A.	N.A.
CPT CODE	62270	Spinal puncture, lumbar, diagnostic	\$19.67	\$19.48	\$6.24	N.A.	N.A.	N.A.
CPT CODE	62272	Spinal puncture, therapeutic, for drainage of spinal fluid (	\$18.19	\$18.19	\$0.24	IV.A.	IV.A.	14.74.
APG#		SIMPLE LASER EYE PROCEDURES		440.70	\$13.85	\$8.72	\$7.93	\$2.97
CPT CODE	65855	Trabeculoplasty by laser surgery, one or more sessions	\$16.91	\$12.79		\$39.99	\$26.73	\$43.35
CPT CODE		Discission of secondary membraneous cataract, and/or anterio	\$18.00	\$14.17	\$15.23	\$39.99	\$26.73	\$43.35
APG#	290	COMPLEX LASER EYE PROCEDURES		100.00	170.75	\$215.28	\$200.49	\$122.56
CPT CODE	67105	Repair of retinal detachment, one or more sessions, photocoagulation, with(out) drainage of subretinal fl	\$109.44	\$73.82	\$73.75		\$12.01	\$33.26
CPT CODE	67228	Destruction of extensive or progressive retinopathy (e.g., diabetic retinopathy) one or more sessions; ph	\$59.45	\$59.45	\$1.14	\$29.14	\$12.01	\$33.20
APG#	291	CATARACT PROCEDURES					\$53.79	\$22,32
CPT CODE	66850	Removal of lens material; phacofragmentation technique	\$36.14	\$21.21	\$35.72	\$61.16		\$22.32
CPT CODE	66940	Extraction of lens with or without iridectomy; extracapsular	\$34.08	\$15.96	\$47.70	\$42.11	\$44.27	\$77.81
CPT CODE	66983	Intracapsular cataract extraction with insertion of intraocular lens prosthesis	\$40.03	\$21.20	\$46.08	\$72.82	\$49.55	
CPT CODE ,	66984	Extracapsular cataract removal with insertion of intraocular	\$31.89	\$20.00	\$29.29	\$78.62	\$49.74	\$71.01
CPT CODE		Insertion of intraocular lens subsequent to cataract removal	\$26.16	\$15.96	\$28.09	\$69.41	\$47.95	\$66.70
APG#	292	SIMPLE ANTERIOR SEGMENT EYE PROCEDURES FOR GLAUCOMA					-	
CPT CODE		Iridotomy by stab incision (separate procedure); except transfixion	\$27.13	\$25.75	\$22.79	\$17.19	\$15.78	\$7.60
CPT CODE		Cyclocryotherapy initial	\$49.99	\$49.99	N.A.	\$56.10	\$55.52	\$24.29
APG#	293	COMPLEX ANTERIOR SEGMENT EYE PROCEDURES FOR GLAUCOMA					-	
CPT CODE		Fistulization of sclera for glaucoma; trephination with iridectomy	\$43.16	\$43.16	\$9.66	\$63.54	\$66.53	\$21.81
CPT CODE	66170	Fistulization of sclera for glaucoma trabeculectomy ab externo	\$30.04	\$11.33	\$35.47	\$117.79	\$88.24	\$101.5
APG#	294	SIMPLE ANTERIOR SEGMENT EYE PROCEDURES EXCEPT FOR GLAUCOMA					!	
CPT CODE	65450	Destruction of lesion of cornea by cryotherapy, photocoagulation or thermocauterization	\$32.30	\$32.30	\$4.03	\$35.52	\$26.69	\$27.79
CPT CODE	66820	Discussion or secondary membraneous cataract and/or anterior	\$46.04	\$42.00	\$36.78	\$48.02	\$36.39	\$29.53
APG#	2002	MODERATE ANTERIOR SEGMENT EYE PROCEDURES						1

MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT LABOR COSTS - SURGICAL PROCEDURES Hospitals A.S.C.s Standard Standard SUBGICAL Mean Median Deviation Median Deviation APG & CPT DESCRIPTION PROCEDURES 66625 Iridectomy, w/corneoscleral or corneal section; peripheral of glaucoma (separate procedure) \$33,48 \$43.48 \$23.19 \$49.07 \$34.03 \$45.23 66830 Removal of secondary membraneous cataract, with corneoscleral section, with(out) iridectomy \$20.23 \$20.67 N.A. \$35.97 \$36.33 296 COMPLEX ANTERIOR SEGMENT EYE PROCEDURES EXCEPT FOR GLAUCOMA \$75.63 ΝΔ \$92.99 \$54.39 65750 Keratoplasty, penetrating, includes autografts and fresh or preserved grafts \$49.99 CPT CODE \$31.95 \$26.95 \$84.50 \$47.98 \$69.40 67010 Removal of vitreous, anterior approach; subtotal removal with mechanical vitrectomy \$37.88 297 SIMPLE POSTERIOR SEGMENT EYE PROCEDURES APG# NA. 67208 Destruction of localized lesion of retina (e.g., maculopathy, choroidopathy, small tumors), one or more s \$32.17 \$32 17 \$39.73 N.A. 67227 Destruction of extensive or progressive retinopathy (e.g., diabetic retinopathy, one or more sessions; cry \$10.24 \$60.26 \$60.26 N.A. 298 COMPLEX POSTERIOR SEGMENT EYE PROCEDURES APG# \$35.76 \$98.82 \$70.59 \$88.10 \$46.30 \$38.10 67036 Vitrectomy, mechanical, pars plana approach CPT CODE \$86.91 67101 Repair of retinal detachment, one or more sessions, cryotherapy or diathermy, with(out) drainage of subr \$97.64 452.86 \$244.46 \$200.49 \$97.64 CPT CODE 299 STRABISMUS & MUSCLE EYE PROCEDURES \$41.90 438 73 \$23.96 \$55.47 \$36.65 CPT CODE 67311 Strabismus surgery on patient not previously operated on, an \$82.70 \$66.53 \$81.57 67312 Strabismus surgery on patient not previously operated on: an \$32.98 \$15.97 300 SIMPLE REPAIR & PLASTIC PROCEDURES OF EYE APG# \$46.49 \$26.68 \$46.43 \$33.79 \$31.95 \$25.38 67840 Excision of lesion of eye lid without closure or with simple CPT CODE \$47.29 \$34.01 \$25.39 \$30.40 \$74.37 \$68.28 67921 Repair of entropion suture CPT CODE 301 COMPLEX REPAIR & PLASTIC PROCEDURES OF EYE \$26,01 \$63.07 \$41,90 \$80.79 \$54.38 67904 Repair of blepharoptosis (tarsol-levator resection or advancement, external approach \$39.60 CPT CODE \$58.22 \$39.64 \$115.85 \$69.46 \$92.16 \$53.88 68720 Dacryocystorhinostomy (fistulization of lacrimal sac to nasal cavity) CPT CODE 313 OTORHINOLARYNGOLOGIC FUNCTION TESTS APG# N A ΝΔ N A NΔ N.A. N.A. 92545 Oscillating tracking test, with recording CPT CODE \$378.02 N.A. NΑ NA. 92585 Brainstem evoked response recording (evoked response (EEG) audiometry) \$378.02 N.A. 314 MAJOR EXTERNAL EAR PROCEDURES \$33.62 \$27.58 \$19.25 \$34.77 \$32.90 \$21.77 69140 Excision exostosis (es), external auditory canal CPT CODE \$43.14 \$22.50 \$158.81 \$158.81 \$159.59 \$41.81 69310 Reconstruction of external auditory canal (meatoplasty), separate procedure CPT CODE 315 TYMPANOSTOMY & OTHER SIMPLE MIDDLE EAR PROCEDURES 69420 Myringotomy including aspiration and/or eustachian tube inflation requiring general anesthesia \$25.45 \$22.36 \$22.12 \$52.67 \$43.74 \$38.43 \$6.75 \$34.47 \$22,12 69433 Tympanostomy (requiring insertion of ventilating tube), local or topical anesthesia \$16.59 \$16.00 CPT CODE 316 TYMPANOPLASTY & OTHER COMPLEX MIDDLE EAR PROCEDURES \$47.98 \$21.25 \$159.78 \$86.14 \$176.11 69631 Tympanoplasty w/o mastoidectomy (including canalplasty, atticotomy and/or middle ear surgery), initial \$46.43 \$83.29 \$139.98 \$66.04 \$173.09 69660 Stapedectomy with re-establishment of ossicular continuity, with(out) use of foreign material \$90.62 \$60.09 318 SIMPLE AUDIOMETRY APG# \$8.23 ΝΔ N.A. \$8.23 92557 Basic comprehensive audiometry CPT CODE NΔ \$0.47 \$0.47 NΔ N.A. N.A. 92567 Tympanometry 319 REMOVAL OF IMPACTED CERUMEN APG# \$14.73 \$10.97 \$9.00 \$15.38 69210 Removal impacted cerumen (separate procedure), one or both ears CPT CODE \$34,68 \$26,48 \$29,14 \$70.18 \$50.93 \$59.89 AGGREGATE MEAN FOR ALL SURGICAL PROCEDURES

		MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT LABOR COSTS - SUF	RGICAL F		IRES			
				Hospitals			A.S.C.s	
SURGICAL					Standard			Standard
PROCEDURES	1	APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	134	BLOOD & BLOOD PRODUCT EXCHANGE						
CPT CODE		Exchange transfusion, blood, other than newborn	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Therapeutic apheresis (plasma and/or cell exchange)	\$254.68	\$254.68	\$173.27	N.A.	N.A.	N.A.
APG#	136	ALLERGY TESTS AND IMMUNOTHERAPY		·				
CPT CODE	95001	Percutaneous tests (scratch, puncture, prick) with allergenic extracts, immediate type reaction, specify num	\$5.37	\$5.37	N.A.	N.A.	N.A.	N.A.
APG#	187	PERITONEAL DIALYSIS						
CPT CODE	90945	Dialysis procedure other than hemodialysis (eg, peritoneal, hemofiltration), with single physician evaluation	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	90947	Dialysis procedure other than hemodialysis (eg, peritoneal, hemofiltration) requiring repeated evaluations, wit	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#		PROCEDURES FOR PREGNANCY & NEONATAL CARE						
CPT CODE	59025	Fetal non-stress test	\$21.89	\$21.89	N.A.	N.A.	N.A.	N.A.
CPT CODE	59050	Initiation and/or supervision of internal fetal monitoring during labor by consultant with report (separate proc	\$15.75	\$15.75	N.A.	N.A.	N.A.	N.A.
APG#		ELECTROCONVULSIVE THERAPY						
CPT CODE	90870	Electroconvulsive therapy (includes necessary monitoring); single seizure	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	90871	Electroconvulsive therapy (includes necessary monitoring); multiple seizures, per day	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#		SUBDURAL & SUBARACHNOID TAP						
CPT CODE	62225	Replacement or irrigation, ventricular catheter	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	63744	Replacement, irrigation or revision of lumbosubarachnoid shunt	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	268	NEUROSTIMULATOR AND VENTRICULAR SHUNT IMPLANTATION						
CPT CODE	63650	Percutaneous implantation of neurostimulator electrodes; epidural	\$28.11	\$28.11	N.A.	N.A.	N.A.	N.A.
CPT CODE	64560	Percutaneous implantation of neurostimulator electrodes; autonomic nerve	N.A.	N.A.	N.A.	\$17.33	\$17.33	N.A.
APG#	287	MINOR OPTHALMOLOGICAL TESTS & PROCEDURES						41.5
CPT CODE	92235	Ophthalmoscopy, with medical diagnostic evaluation; with fluorescein angiography (includes multiframe phot	\$4.39	\$4.39	N.A.	N.A.	N.A.	N.A.
APG#		INNER EAR PROCEDURES		-				N.A.
CPT CODE	69806	Endolymphatic sac operation; with shunt	\$68.57	\$68.57	\$2.77	N.A.	N.A.	
CPT CODE	69840	Revision fenestration operation	N.A.	N.A.	N.A.	\$29.07	\$29.07	N.A.

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		MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT EQUIPMENT COSTS -	SURGIC	AL PRO	SEDURES			
				Hospitals			A.S.C.s	
SURGICAL					Standard			Standar
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviatio
APG#	2	SUPERFICIAL NEEDLE BIOPSY & ASPIRATION						
CPT CODE		Puncture Aspiration of Cyst of Breast	\$16.34	\$11.40	\$10.90	\$12.92	\$11.40	\$3.4
CPT CODE		Biopsy of breast, needle (separate procedure)	\$40.53	\$45.60	\$14.35	\$29.64	\$34.20	\$9.3
CPT CODE		Biopsy, thyroid, percutaneous needle	\$34.20	\$34.20	\$16.12	\$45.60	\$45.60	N.A.
APG#	3	SIMPLE INCISION & DRAINAGE						
CPT CODE		Incision and drainage of infected or noninfected sebaceous cyst	\$22.80	\$20.52	\$4.42	\$23.34	\$20.52	\$4.8
CPT CODE		Incision and drainage of abscess (e.g., carbuncle)	\$25.32	\$22.80	\$9.08	\$20.98	\$20.52	\$0.9
CPT CODE	10120	Incision & removal of foreign body subcutaneous tissues; simple	\$24.14	\$22.80	\$3.79	\$24.73	\$22.80	\$7.4
APG#	4	COMPLEX INCISION AND DRAINAGE						
CPT CODE		Incision and drainage of hematoma; complicated	\$39.52	\$38.00	\$3.15	\$38.69	\$38.00	\$6.3
	10141	Incision and drainage of heritational, complexes	\$43.07	\$38.00	\$11.00	\$37.58	\$38.00	\$7.7
CPT CODE	10180	Incision and drainage, complex, post-operative would intotal.	\$40.07	\$38.00	\$4.91	\$37.24	\$38.00	\$4.1
CPT CODE	23931	Deep dissection below fascia, for deep infection of foot, with(out) tendon sheath involvement; single bur	\$33.44	\$26.60	\$9.61	\$32.30	\$28.50	\$9.0
CPT CODE		COMPLEX INCISION AND DRAINAGE						
APG#	5		\$18.46	\$15.20	\$6.97	\$16.47	\$15.20	\$3.1
CPT CODE		Debridement of nails, manual; five or less  Debridement of nails, manual each additional; five or less	\$23.31	\$22.80	\$8.72	\$21.79	\$22.80	\$5.4
CPT CODE		SIMPLE DEBRIDEMENT & DESTRUCTION	72010					
APG#	6		\$27.69	\$22,80	\$8.62	\$28.88	\$22.80	\$9.5
CPT CODE		Debridement of skin, partial thickness	\$19.24	\$15.20	\$9.15	\$17.86	\$15.20	\$5.0
CPT CODE		Avulstion of nail plate, partial or complete, simple; single	\$27.74	\$26.60	\$3,60	\$30.40	\$26.60	\$9.5
CPT CODE		Destruction by any method, with or without surgical curettement	\$39.83	\$38.00	\$4.34	\$34.66		\$7.5
CPT CODE		Removal of implant superficial, (e.g., buried wire, pin or rod	V35.03	V30.00	V-1.04	404.00	100100	
APG#	7	SIMPLE EXCISION & BIOPSY	\$23.75	\$22.80	\$4.65	\$25.96	\$22.80	\$6.7
CPT CODE	11401	Excision, benign lesion, except skin tag, trunk, arms or leg  Excision, other benign lesion (unless listed elsewhere); face, ears, eyelids, nose, lips, mucous membrane;	\$28.79	\$26.60	\$8,94	\$29.07	\$26.60	\$7.7
CPT CODE	11440	Excision, other benign lesion (unless listed elsewhere); face, ears, eyenios, nose, lips, flucous membrane,	\$26.45	\$22.80	\$8.81	\$25.71	\$22.80	\$7.2
CPT CODE	11601	Excision, malignant lesion; trunk, arms or legs; lesion diameter .6 - 1.0 cm	\$29.08	\$26.60	\$9.79	\$31.01		\$8.
CPT CODE		Excision, malignant lesion, face, ears, eyelids, nose, lips;	923.00	V20.00	00.70	401.01	720.00	101
APG#	8	COMPLEX EXCISION, 810PSY & DEBRIDEMENT	\$25.48	\$22.80	\$6,41	627 10	\$22.80	\$7.
CPT CODE	11404	Excision, benign lesion, except skin tag (unless listed else	\$25.76	\$22.80	\$7.44	\$30.36	\$22.80	\$11.5
CPT CODE		Excision, benign lesion, except skin tag (unless listed else	\$30.26	\$26.60	\$11.56	\$32.62	\$26.60	\$8.
CPT CODE		Excision, malignant, lesion, face, ears, eyelids, nose, lips	\$30.20	\$20.00	\$11.00	V32.02	VZ 0.00	- 00.
APG#		LIPECTOMY & EXCISION WITH RECONSTRUCTION	\$49.40	\$45.60	\$8.87	\$51.93	\$45.60	\$10.
CPT CODE		Excision, excessive skin and subcutaneous tissue	\$70.15	\$68,40	\$6.32	\$63.65	\$68,40	\$9.
CPT CODE	15972	Excision, leg pressure ulcer, with local skin flap(s)	\$86.98	\$91.20	\$15.72		\$91.20	\$0.
CPT CODE		Ligation and division and completion of strip, of long or short saphenous veins with radical excision of ul	\$86.98	\$91.20	\$15.72	991.20	951.20	¥0.
APG#	10	SIMPLE SKIN REPAIR	\$24.97	\$22.80	\$5.83	622.00	\$22.80	\$0.
CPT CODE	12001	Simple repair of superficial wounds of scalp, neck, axillae	\$24.97	\$22.80	\$8.21		\$22.80	
CPT CODE,	12002	Simple repair of superficial wounds of scalp, neck, axillae,				\$33.87		
CPT CODE		Layer closure of wounds of scalp axillae, trunk and/or extremities (excluding hands and feet); 2.5cm or l	\$30.83	\$34.20	\$8.53	\$33.67	\$34.20	\$10.
APG#	11	COMPLEX SKIN REPAIR	100.00	400.00	\$2,43	\$26,60	\$26.60	\$0.
CPT CODE		Simple repair or superficial wounds of face, ears, eyelids,	\$26.89	\$26.60				
CPT CODE	12017	Simple repair or superficial wounds of face, ears, eyelids,	\$37.71	\$34.20	\$10.91		\$34.20	
CPT CODE		Layer closure of wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.5cm or less	\$49.72	\$45.60	\$28.60	\$34.58		
CPT CODE	15822	Blepharoplasty, upper eyelid	\$62.26	\$57.00	\$13.66	\$59.28	\$57.00	\$19.
APG#	12	SKIN & INTEGUMENT GRAFT, TRANSFER & REARRANGEMENT						1.10
CPT CODE	14060	Adjacent tissue transfer or rearrangement, eyelids, nose, ears and/or lips; defect 10 sq. cm or less	\$58.75	\$57.00	\$4.28		\$57.00	\$16.
CPT CODE	15100	Split graft, trunk, scalp, arms, legs, hands, and/or feet; 1	\$68.50	\$68.40	\$19.91	\$52.59	\$47.50	\$14.
CPT CODE	15260	Full thickness graft, free, including direct closure of donor	\$80.34	\$79.80	\$3.28	\$74.31	\$79.80	\$9.
APG#	27	SIMPLE INCISION & EXCISION OF BREAST						

		MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT EQUIPMENT COSTS		Hospitals			A.S.C.s		
				Hospitals	Standard		A.S.C.S	Standar	
SURGICAL		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation	
PROCEDURES			\$38.60	\$38.00	\$5.65	\$37.43	\$38.00	\$5.0	
CPT CODE		Biopsy of breast, incisional			\$8.54	\$41.97	\$45.60	\$6.6	
CPT CODE		Excision or cyst, fibroadenoma, or other benign or malignant	\$46.09	\$45.60	\$8.54	\$41.97	\$45.60	90.0	
APG#	28	BREAST RECONSTRUCTION & MASTECTOMY	AEO E2	\$53.20	\$15.09	\$50.60	\$53.20	\$8.8	
CPT CODE		Mastectomy for gynecomastia through circular or other incision	\$58.52	\$62.70	\$15.09	\$56.09	\$53.20	\$21.6	
CPT CODE		Mastectomy, partial	\$67.21						
CPT CODE		Mastectomy, subcutaneous	\$51.73	\$45.60	\$14.20	\$57.00	\$51.30	\$14.4	
APG#	53	OCCUPATIONAL THERAPY							
CPT CODE		Training in activities of daily living (self care skills and	\$33.29	\$22.80	\$18.01		N.A.	N.A.	
CPT CODE		Training in activities of daily living (self care skills and	\$18.52	\$11.40	\$12.59	N.A.	N.A.	N.A.	
APG#	54	PHYSICAL THERAPY							
CPT CODE		Physical medicine treatment to one area hot or cold packs	\$19.91	\$15.20	\$5.65		N.A.	N.A.	
CPT CODE	97128	Physical medicine treatment to one area, initial 30 minutes,	\$16.47	\$15.20	\$8.21	N.A.	N.A.	N.A.	
APG#	55	DIAGNOSTIC ARTHROSCOPY							
CPT CODE	29815	Arthroscopy, shoulder, diagnostic, with(out) synovial biopsy (separate procedure)	\$56.75	\$49.40	\$26.89		\$45.60	\$16.8	
CPT CODE	29870	Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)	\$44.00	\$45.60	\$13.76	\$48.95	\$45.60	\$19.8	
APG#	56	THERAPEUTIC ARTHROSCOPY							
CPT CODE	29877	Arthroscopy, knee, surgical debridement/shaving of cartilage (chondroplasty)	\$48.35	\$45.60	\$9.43	\$52.30	\$45.60	\$17.0	
CPT CODE	29881	Arthroscopy, knee, surgical with meniscectomy (medical or lateral including any meniscal shaving)	\$57.20	\$45.60	\$23.09	\$60.93	\$57.00	\$18.4	
APG#	57	REPLACEMENT OF CAST							
CPT CODE	29075	Application elbow to finger (short arm)	\$23.61	\$22.80	\$8.45	\$21.28	\$22.80	\$3.4	
CPT CODE		Application	\$25.17	\$22.80	\$8.36	\$21.28	\$22.80	\$3.4	
APG#	58	SPLINT, STRAPPING & CAST REMOVAL							
CPT CODE		Application of short arm splint (forearm to hand); static	\$25.51	\$22.80	\$13.28	\$21.53	\$22.80	\$3.1	
CPT CODE		Strapping unna boot	\$16.47	\$15.20	\$5.80	\$7.60	\$7.60	N.A.	
APG#	59	TREATMENT OF CLOSED FRACTURE & DISLOCATION OF FINGER, TOE & RIB			1				
CPT CODE		Treatment of rib fracture, closed, uncomplicated, each	\$24.70	\$22.80	\$12.20	N.A.	N.A.	N.A.	
CPT CODE		Treatment of closed phalangeal shaft fracture, proximal or m	\$22.80	\$19.00	\$5.56		\$19.00	\$2.9	
APG#		TREATMENT OF CLOSED FRACTURE & DISLOCATION EXCEPT FINGER, TOE & RIB			-				
CPT CODE		Treatment of closed distal radial fracture (e.g., Colles or Smith type) or epiphyseal separation, with(out)	\$32.88	\$32.68	\$6.53	\$30.62	\$32.68	\$9.4	
CPT CODE		Treatment of closed distal radial fracture (e.g., Colles or Smith type) or epiphyseal separation, with(out)	\$24.97	\$22.80	\$4.40		\$22.80	\$6.4	
CPT CODE		Treatment of closed metatarsal fracture without manipulation	\$22.65	\$22.80	\$10.55	\$22.04		\$7.	
APG#	62	TREATMENT OF OPEN FRACTURE & DISLOCATION EXCEPT FACE	VEE:00	100.00	110100	1000	100.00		
CPT CODE		Treatment of open distal radial fracture (e.g., Colles or Smith	\$73.08	\$68.40	\$20.53	\$68.40	\$68.40	\$0.0	
CPT CODE		Open treatment of closed or open distal radial fracture (e.g.,	\$67.39	\$72.20	\$9.68		\$72.20	\$18.	
CPT CODE		Open treatment of closed or open phalangeal shaft fracture	\$63.41	\$68.40	\$9.28		\$68.40	\$6.	
APG#		JOINT MANIPULATION UNDER ANESTHESIA	V00.41	400.40	VJ.20	¥00.41	+00.40	+0	
			\$23.75	\$22.80	\$3.29	\$25.03	\$22.80	\$13.	
CPT CODE		Manipulation under anesthesia, shoulder joint, including app	\$24.55	\$22.80	\$6.32	\$27.64		\$13.	
CPT CODE		Manipulation of knee joint under general anesthesia (include	924.00	\$22.6U	40.32	927.04	922.00	913.	
APG#	64	SIMPLE MAXILLOFACIAL PROCEDURES	\$31.03	\$26.60	\$7.40	\$26.60	\$26.60	\$0.	
CPT CODE		Drainage of hematoma, nasal, internal approach							
CPT CODE		Excision, nasal polyp(s), simple unilateral	\$39.09	\$38.00	\$14.86		\$34.20	\$15.0	
CPT CODE		Excision, nasal polyp(s), simple bilateral	\$45.87	\$45.60	\$14.41		\$34.20	\$4.6	
CPT CODE		Sinusotomy, maxillary (antrotomy); intranasal, unilateral	\$55.42	\$45.60	\$22.56	\$59.28	\$46.36	\$27.	
APG#		COMPLEX MAXILLOFACIAL PROCEDURES							
CPT CODE		Septoplasty or submucous resection, with or without cartilage scoring, contouring or replacement with g	\$62.45	\$60.80	\$6.10		.\$60.80	\$24.9	
CPT CODE		Reconstruction, functional, internal nose (septal or other intranasal dermatoplasty)	\$68.67	\$66.50	\$14.94	\$70.21	\$64.60	\$9.5	
APG#	66	INCISION OF BONE, JOINT, & TENDON							
CPT CODE	25000	Tendon sheath incision at radial styloid for deQuervain's disease	\$36.48	\$34.20	\$7.71	\$32.68	\$34.20	\$6.8	

	MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT EQUIPMENT COSTS		Hospitals			A.S.C.s	
			ridopitale	Standard			Standard
SURGICAL	APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
PROCEDURES	28270 Capsulotomy for contracture; metatarso-phalangeal joint, with(out) tenorrhaphy, single, joint, each joint (	\$50.92	\$45.60	\$25.92	\$43.66	\$45.60	\$11.21
CPT CODE		100.02		12112			
APG#	67 BUNION PROCEDURES  28290 Hallux valgus (bunion) correction, with or without sesamoidectomy; simple exostectomy (Silver type pro	\$51.06	\$45.60	\$12.80	\$53.28	\$45.60	\$15.18
CPT CODE	28290 Hallux valgus (bunion) correction, with or without sesamoidectomy, simple exostectomy (with the type pro-	\$53.06	\$45,60	\$11.12		\$57.00	\$16.3
CPT CODE		100.00					
APG#	68 EXCISION OF BONE, JOINT & TENDON OF THE HAND & FOOT  26160 Excision or lesion of tendon sheath or capsule (e.g., cyst, mucous cyst, ganglion), hand or finger	\$36.92	\$34.20	\$8.75	\$32.75	\$31.16	\$5,63
CPT CODE		\$40.53	\$41.80	\$6.04	\$42.43	\$41.80	\$4.7
CPT CODE	28080 Excision of interdigital (Morton) neuroma, single, each	4-10100	111100	10.0			
APG#	69 EXCISION OF 80NE , JOINT & TENDON EXCEPT HAND & FOOT	\$36.91	. \$34.20	\$7.21	\$35.18	\$30.40	\$9.4
CPT CODE	24105 Excision, olecranon bursa	\$36.10	\$30.40	\$8.65	\$41.17		\$16.5
CPT CODE	27345 Excision of synovial cyst of popiteal space (Baker's cyst)	V30.10	V30.40	40.00	********	102100	1.515
APG#	70 ARTHROPLASTY	\$51.30	\$45.60	\$15.61	\$40.17	\$41.80	\$10.9
CPT CODE	25447 Interposition arthroplasty, intercarpal or carpometacarpal joints	\$43.83	\$38.00	\$8.72	\$37.32	\$38.00	\$5.8
CPT CODE	26535 Arthroplasty interphalangeal joint; single, each	943.03	430.00	70.72	407.32	300.00	+0.0
APG#	71 HAND & FOOT TENOTOMY	\$36.34	\$34.20	\$7.47	\$34.83	\$34.20	\$5.3
CPT CODE	26455 Tenotomy, flexor, single, finger open, each	\$38.35	\$34.20	\$7.69		\$34.20	\$25.6
CPT CODE	28234 Tenotomy, open, extensor, foot or toe	930.30	\$34.20	07.03	V-40.00	704.20	720.0
APG#	72 SIMPLE HAND & FOOT REPAIR EXCEPT TENOTOMY	\$32.44	\$30.40	\$5.12	\$29.76	\$30.40	\$6.2
CPT CODE	26055 Tendon sheath Incision for trigger finger	\$48.45	\$45.60	\$9.66		\$45.60	\$5.7
CPT CODE	28285 Hammertoe operation, one tow (e.g., interphalangeal fusion, filleting, phalangectomy)	940.45	\$45.00	\$5.00	\$45.50	745.00	VJ.7
APG#	73 COMPLEX HAND & FOOT REPAIR	\$63.18	\$64.60	\$5.17	\$63.65	\$64,60	\$15.8
CPT CODE	26860 Arthrodesis, interphalangeal joint; with or w/o internal fix	\$33.36	\$26.60	\$8.80		\$26.60	\$31.5
CPT CODE	28810 Amputation, metatarsal, with toe, single	\$33.30	\$20.00	70.00	740.30	720.00	V01.5
APG#	74 REPAIR, EXCEPT ARTHROTOMY, OF BONE, JOINT, TENDON EXCEPT OF HAND & FOOT	\$71.82	\$68.40	\$27.43	\$77.04	\$68.40	\$13.3
CPT CODE	23420 Repair of complete shoulder (rotator) cuff avulsion, chronic	\$55.43	\$48.26	\$19.24	\$45.79		\$21.3
CPT CODE	25260 Repair, tendon or muscle, flexor, forearm and/or wrist; prim	\$55.43	\$40.20	\$15.24	940.75	430.00	721.3
APG#	75 ARTHROTOMY EXCEPT OF HAND & FOOT	\$51.30	\$45.60	\$10.31	\$64.60	\$60.80	\$20.1
CPT CODE	27332 Arthrotomy, knee, for excision of semilunar cartilage (meniscectomy); medial or lateral	\$51.30	\$45.60	\$13.17	\$68.40		\$18.6
CPT CODE	27333 Arthrotomy, knee, for excision of semilunar cartilage (meniscectomy); medial and lateral	\$52.37	\$45.60	913.17	900.40	300.40	\$10.0
APG#	76 ARTHROCENTESIS & LIGAMENT OR TENDON INJECTION	\$27.23	\$32.30	\$10.59	F25 76	\$15.20	\$20.0
CPT CODE	20550 Injection, tendon sheath, ligament, trigger points or ganglion cyst	\$27.23	\$24.32	\$8.82	\$25.23		\$2.9
CPT CODE	20605 Arthrocentesis, aspiration and/or injection; intermediate joint, bursa or ganglion cyst	\$24.09	\$24.32	\$4.53	\$24.02		\$0.6
CPT CODE	20610 Arthrocentesis, aspiration and/or injection; major joint or bursa	\$24.09	\$24.32	\$4.53	\$24.02	924.32	\$0.0
APG#	77 SPEECH THERAPY	101.00	101.00	\$8.59	AL A	N.A.	N.A.
CPT CODE	92507 Speech, language or hearing therapy, with continuing medical supervision; group	\$34.89	\$31.92	\$1.32		N.A.	N.A.
CPT CODE	92508 Speech, language or hearing therapy, with continuing medical supervision; individual	\$32.68	\$31.92	91.32	IV.A.	IN.A.	14.M.
APG#	79 PULMONARY TEST & THERAPY EXCEPT SPIROMETRY	11001	445.00	\$1,84	101.0	N.A.	N.A.
CPT CODE,	94650 Intermittent positive pressure breathing (IPP8) treatment, a	\$16.34	\$15.20				N.A.
CPT CODE	94760 Noninvasive ear or pulse oximetry for oxygen saturation; sin	\$7.95	\$7.60	\$4.34	N.A.	N.A.	N.A.
APG#	80 NEEDLE & CATHETER BIOPSY, ASPIRATION, LAVAGE & INTUBATION		40.00	44.04	\$34.20	\$34.20	NI A
CPT CODE	32000 Thoracentesis, puncture or pleural cavity for aspiration, in	\$32.13	\$34.20	\$4.61			
CPT CODE	32405 Biopsy, lung or mediastinum, percutaneous needle	\$42.43	\$45.60	\$11.38	N.A.	N.A.	N.A.
APG#	81 SIMPLE ENDOSCOPY OF THE UPPER AIRWAY				404.45	1 44 5 00	\$11.2
CPT CODE	31505 Laryngoscopy, indirect (separate procedure); diagnostic	\$21.22	\$22.80	\$6.37		\$15.20	
CPT CODE	31510 Laryngoscopy, indirect (separate procedure) with biopsy	\$22.09	\$22.80	\$6.92	\$21.15	\$15.20	\$11.2
APG#	82 COMPLEX ENDOSCOPY OF THE UPPER AIRWAY			1000	100.5	1 100 15	45.5
CPT CODE	31535 Laryngoscopy, direct, operative with biopsy	\$32.21	\$30.40	\$5.02		\$30.40	
CPT CODE	31541 Laryngoscopy, direct, operative, with excision of tumor, w/o	\$39.01	\$34.20	\$16.84	\$36.10	\$34.20	\$12.7
APG#	83 SIMPLE ENDOSCOPY OF THE LOWER AIRWAY						

SURGICAL				Hospitals			A.S.C.s	
					Standard			Standard
				14 (1)	Deviation	Mean	Median	Deviation
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median \$30,40	\$4.43	\$31.82	\$30.40	\$6.40
CPT CODE		Bronchoscopy diagnostic, (flexible or rigid), w/ or w/o cell	\$30.40		\$4.43		\$34.20	\$1.90
CPT CODE	31625	Bronchoscopy with biopsy	\$33.69	\$34.20	\$4.86	\$33.25	\$34.20	\$1.90
APG#	84	COMPLEX ENDOSCOPY OF THE LOWER AIRWAY			45.74	400.00	\$39.90	\$8.06
CPT CODE		Bronchoscopy w/ transbronchial lung biopsy w/ or w/o fluoroscopic guidance	\$35.15	\$34.20	\$5.74			
CPT CODE	31629	Bronchoscopy with transbronchial needle aspiration biopsy	\$35.47	\$34.20	\$6.85	\$34.20	\$34.20	N.A.
APG#		NASAL CAUTERIZATION & PACKING				100.10	400.40	44.50
CPT CODE	30901	Control nasal hemorrhage, anterior, simple (cauterization);	\$29.02	\$30.40	\$7.26		\$30.40	\$4.56
CPT CODE	30903	Control nasal hemorrhage, anterior, complex (cauterization w	\$29.36	\$30.40	\$6.15	\$37.24	\$30.40	\$15.29
APG#	86	SIMPLE LIP, MOUTH & SALIVARY GLAND PROCEDURES						
CPT CODE	41110	Excision of lesion of tongue without closure	\$31.98	\$30.40	\$4.43	\$32.93	\$30.40	\$9.51
CPT CODE	41112	Excision of lesion of tongue with closure; anterior two-thirds	\$33.62	\$30.40	\$8.19	\$29.45	\$26.60	\$11.35
APG#	87	COMPLEX LIP, MOUTH, & SALIVARY GLAND PROCEDURES						
CPT CODE	40500	Vermilionectomy (lip shave), mucosal advancement	\$38.48	\$34.20	\$5.90		\$34.20	\$3.80
CPT CODE		Excision of parotid tumor or parotid gland; lateral lobe, w/	\$86.82	\$79.80	\$24.30	\$54.87	\$59.28	\$18.34
APG#	88	MISCELLANEOUS SINUS, TRACHEAL & LUNG PROCEDURES				1		
CPT CODE	31030	Sinusotomy, maxillary (antrotomy); radical (Caldwell-Luc) with removal of antrochoanal polyps	\$66.06	\$68.40	\$12.46	\$72.79		\$16.33
CPT CODE		Ethmoidectomy intranasal, anterior	\$60.17	\$57.00	\$8.55	\$64.07	\$60.80	\$8.52
APG#	105	EXERCISE TOLERANCE TESTS						
CPT CODE	93015	Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise; continuous electro	\$42.43	\$45.60	\$11.55		N.A.	N.A.
CPT CODE	93017	Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise; continuous electro	\$38.00	\$45.60	\$10.75	N.A.	N.A.	N.A.
APG#		ECHOCARDIOGRAPHY						
CPT CODE	93307	Echocardiography, real-time with image documentation (2D) with or without M-mode recording; complet	\$39.46	\$34.20	\$11.97	N.A.	N.A.	N.A.
CPT CODE	93320	Doppler echocardiography, pulsed wave and/or continuous wave with spectral display; complete	\$15.20	\$11.40	\$7.06	N.A.	N.A.	N.A.
APG#	108	CARDIAC ELECTROPHYSIOLOGIC TESTS						
CPT CODE		Cardioversion, elective, electrical conversion of arrhythmia, external	\$87.94	\$68.40	\$54.95	N.A.	N.A.	N.A.
CPT CODE		Induction of arrhythmia by electrical pacing	\$86.13	\$91.20	\$8.78	N.A.	N.A.	N.A.
APG#		VASCULAR CANNULATION WITH NEEDLE & CATHETER						
CPT CODE	36489	Placement of central venous catheter (subclavian, jugular, or other vein), percutaneous, over age 2	\$41.42	\$47.50	\$11,39	\$49.40	\$49.40	N.A.
CPT CODE		Cannula declotting without balloon catheter	\$54.15	\$41.80	\$30.14	N.A.	N.A.	N.A.
APG#		DIAGNOSTIC CARDIAC CATHETERIZATION						
CPT CODE	92547	Combined left heart catheterization, selective coronary angiography, one or more coronary arteries, and	\$49.88	\$45.60	\$10.64	N.A.	N.A.	N.A.
CPT CODE	93549	Combined right and left heart catheterization, selective coronary angiography, one or more coronary arte	\$78.37	\$58.90	\$43.32	N.A.	N.A.	N.A.
APG#	111	ANGIOPLASTY & TRANSCATHETER PROCEDURES						
CPT CODE		Percutaneous transluminal angioplasty, any method, peripheral artery	\$77.75	\$68.40	\$39.02	N.A.	N.A.	N.A.
CPT CODE		Percutaneous transluminal coronary balloon angioplasty; single vessel	\$165.57	\$182.40	\$35.50	N.A.	N.A.	N.A.
APG#		PACEMAKER INSERTION & REPLACEMENT						
CPT CODE.		Insertion or replacement of pacemaker pulse generator or AID	\$50,16	\$41.80	\$16.64	N.A.	N.A.	N.A.
CPT CODE.		Repair of pacemaker with replacement of pulse generator	\$49.40	\$45.60	\$14.80		N.A.	N.A.
		REMOVAL & REVISION OF PACEMAKER & VASCULAR DEVICE						1
APG# CPT CODE	113	Insertion, replacement, or repositioning of permanent transvenous electrodes only (15 days of more after	\$46.64	\$45,60	\$13.17	N.A.	N.A.	N.A.
		Removal of implantable intravenous infusion pump or venous a	\$37.65	\$45.60	\$10.67		\$34.20	\$29.68
CPT CODE		MINOR VASCULAR REPAIR & FISTULA CONSTRUCTION	+07.00	7.0.00	1.0.07			
APG#		Thrombectomy and/or repair of arterial or venous graft	\$53.96	\$45.60	\$19.76	\$57,00	\$57.00	N.A.
CPT CODE			\$41.80	\$34.20	\$11.93	\$36.48	\$34.20	\$5.10
CPT CODE		Insertion of implantable intravenous infusion pump or venous SECONDARY VARICOSE VEINS & VASCULAR INJECTION	+11.00	757.20	7.1100		101120	10110
APG#			\$69.16	\$72 06	\$12.06	\$70.33	\$72.96	\$16.24
	37785	Ligation, division, and/or excision of secondary varicose veins (clusters), one leg Unlisted procedure, vascular surgery	\$69.16 \$19.00	\$72.96 \$19.00	\$12.06		\$72.96 \$33.44	\$16.24 N A

N.A.

N.A.

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\$91.20 \$91.20 N.A.

N.A. N.A.

\$45.60 \$45.60 N.A.

N.A.

\$51.61 \$45.60

\$29.64 \$22.80

\$36.10 \$36.10

\$17.10 \$15.20

\$22.10 \$22.80

\$22.80 \$19.00

\$19.38 \$20.14

\$26.60 \$30.40

\$22.11 \$22.80

\$27.42 \$22.80

\$30.40 \$34.20

\$26.60 \$22.80

\$27.30 \$22.80

\$33.71 \$32.30

\$33.73 | \$32.30

\$33.60 \$32.30

Standard

\$20.61

Median Deviation

N A

NA.

NΔ

\$11.07

\$16.56

\$14.82

\$10.20

\$13.44

\$3.80

\$6.84

\$6.58

\$5.88

\$8.12

\$9.89

\$11.71

\$10.76

\$9.66

\$5.37

Hospitals

\$68.40

\$79.80

\$158.65 \$125.40 \$111.19 N.A.

\$53.88 \$44.08

\$64.68 \$45.60 \$45.60

\$58.14

\$19.00 \$11.40

\$79.42

\$76.95

\$42.75 \$41.80

N.A.

\$159.60 \$159.60

N.A.

Standard

Median Deviation Mean

\$18.00 N.A.

\$33,45 N.A.

\$42.10 N.A

\$40.02 N.A.

\$96.73 N.A.

\$20.43 N.A

\$0.00 N.A.

\$0.00 N.A.

\$0.00 N.A.

\$8.06 N.A.

\$2.40

\$6.30

\$4 57

\$7.81

\$8.45

\$16.20

\$14.96

\$16.40

\$7.75

\$19.00

\$22.80

\$45.60

\$22.80

\$20.45 \$19.00

\$25.61 \$22.80

\$28.52 \$30.40

\$27.30 \$24.32

\$27.41 \$22.80

\$36.27

\$43.93 \$45.60

\$49.72 \$45.60

\$45.30

\$5.57

\$28.68

N.A. N.A. N.A.

\$7.85 \$42.81 \$38.00

\$6.85 \$19.00 \$20.90

ΝΔ

\$21.40 \$52.57 \$45.60

\$21.83 \$11.40 \$11.40

43239 Upper GI endoscopy incl. esophagus etc. for biopsy and/or collection of specimen by brushing or washin

43246 Upper GI endoscopy including esophagus etc. for directed placement of percutaneous gastrostomy tube

45383 Colonoscopy, fiberoptic, beyond splenic flexure; for ablation of tumor or mucosal lesion

45385 Colonoscopy, fiberoptic, beyond splenic flexure; for removal of polypoid lesion(s)

SURGICAL

APG#

APG#

CPT CODE

CPT CODE

CPT CODE

CPT CODE

APG#

APG#

CPT CODE

CPT CODE

APG#

PROCEDURES

MEAN MEDIAN & STANDARD DEVIATION FOR INDIRECT EQUIPMENT COSTS - SURGICAL PROCEDURES

APG & CPT DESCRIPTION

37618 Ligation, major artery (e.g., post-traumatic, rupture); extremity

117 CARDIOPULMONARY RESUSCITATION & INTUBATION

96501 Chemotherapy injection, intravenous, single premixed agent,

96509 Chemotherapy injection, intravenous, complex, using 1 or more

96510 Chemotherapy inject, iv, complex, using 1 or more agents req. 132 CHEMOTHERAPY EXCEPT 8Y INFUSION

96500 Chemotherapy injection, intravenous, single premixed agent,

92950 Cardionulmonary resuscitation (e.g., in cardiac arrest) 131 CHEMOTHERAPY BY INFUSION

31500 Intubation, endotracheal, emergency procedure

96549 Unlisted chemotherapy procedure

133 TRANSFUSION & PHLE8OTOMY

46610 Anoscopy for removal of polyp

161 PROCTOSIGMOIDOSCOPY WITH EXCISION OR BIOPSY

45331 Sigmoidoscopy, flexible fiberoptic for biopsy and/or collect

45333 Sigmoidoscopy, flexible fiberoptic for removal of polypoid I 162 DIAGNOSTIC UPPER GASTROINTESTINAL ENDOSCOPY

163 THERAPEUTIC UPPER GASTROINTESTINAL ENDOSCOPY

43245 Upper GI endoscopy including esophagus etc. for dilation of

164 DIAGNOSTIC LOWER GASTROINTESTINAL ENDOSCOPY 45378 Colonoscopy, fiberoptic, beyond splenic flexure; diagnostic

45380 Colonoscopy, fiberoptic, beyond splenic flexure; for biopsy 165 THERAPEUTIC LOWER GASTROINTESTINAL ENDOSCOPY

43235 Upper Gl endoscopy including esophagus, stomach and either d

37650 Interrupting, partial or complete, or femoral vein, by ligature, intravascular device

37720 Ligation and division and complete stripping of long or short saphenous veins

		MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT EQUIPMENT COSTS		Hospitals				
SURGICAL				Tiospitais	Standard		A.S.C.s	Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	
CPT CODE	E1020	Cystotomy or cystostomy; with fulguration and/or insertion o	\$38.25	\$40.28	\$3.95	\$40.28	\$40.28	
CPT CODE		Cystostomy; cystostomy with drainage	\$37.43	\$40.28	\$10.15	\$28.50	\$28.50	\$8.06
CPT CODE		Cystostomy, Cystostomy with drainage  Cystostomy w/insertion of ureteral catheter or stent (separate procedure)	\$45.60	\$40.28	\$17.56	\$40.28	\$40.28	\$0.00
APG#		SIMPLE URETHRAL PROCEDURES	+40.00	7-10120	417100	TTOILO	7 10120	
CPT CODE		Biopsy of urethra	\$33.25	\$30.40	\$6.71	\$30.40	\$30.40	\$0.00
CPT CODE		Excision or fulguration; urethral, caruncle	\$30.69	\$30.40	\$1.05		\$30.40	\$1.90
		COMPLEX URETHRAL PROCEDURES	¥30.03	450.40	¥1.00	723.73	750.40	71.3
APG#			\$34.89	\$30.40	\$9.28	624.20	\$34.20	\$5.3
CPT CODE		Excision or fulguration of carcinoma of urethra	\$44.46	\$45,60	\$8.78		\$26.60	
CPT CODE		Excision of urethral diverticulum (separate procedure); male	944.40	. 940.00	90.70	\$20.00	\$20.00	IV.A.
APG#		TESTICULAR EPIDIDYMAL PROCEDURES	\$43.97	\$38.00	\$15.32	A20 17	\$38.00	\$5.23
CPT CODE		Orchiectomy, simple, w/ or w/o testicular prosthesis, scrota		\$38.00	\$16.98		\$38.00	\$9.20
CPT CODE		Orchiectomy, simple w/ or w/o testicular prosthesis, scrotal	\$49.98	938.00	916.98	943.07	938.00	99.20
APG#		INSERTION OF PENILE PROSTHESIS	\$90.77	\$91.20	\$21.86	A72.07	\$74.48	\$17.49
CPT CODE		Insertion of penile prosthesis; non-inflatable		\$91.20	\$21.86		\$74.48	\$17.49
CPT CODE		Insertion of inflatable (multi-component) penile prosthesis, including placement of pump, cylinders, and/o	\$102.98	\$96.90	\$28.17	\$79.80	\$74.46	\$24.37
APG#		COMPLEX PENILE PROCEDURES	407.77	400.00	440.00			A. A
CPT CODE		Removal or replacement of non-inflatable (semi-rigid) or inflatable (self-contained) penile prosthesis	\$67.77	\$39.90	\$48.03	\$38.00	N.A.	N.A.
CPT CODE		Removal, repair or replacement of inflatable penile prosthesis, including pump and/or reservoir and/or cyli	\$67.77	\$55.10	\$41.86	\$38.00	\$34.20	\$6.58
APG#		SIMPLE PENILE PROCEDURES		115.00	10.71	105.04	100.00	10.00
CPT CODE		Circumcision, clamp procedure except newborn	\$41.17	\$45.60	\$9.74	\$25.84	\$26.60	\$8.06
CPT CODE		Circumcision, surgical excision other than clamp	\$36.88	\$34.20	\$10.30	\$36.57	\$34.20	\$7.58
APG#		PROSTATE NEEDLE & PUNCH 8IOPSY						
CPT CODE		Biopsy, prostate needle or punch single or multiple, any app	\$24.80	\$22.80	\$4.63		\$22.80	\$0.00
CPT CODE		Biopsy, prostate incisional, any approach	\$22.80	\$19.00	\$7.06	\$20.90	\$19.00	\$4.65
APG#		TRANSURETHRAL RESECTION OF PROSTATE & OTHER PROSTATE PROCEDURE						
CPT CODE		Transurethral resection of bladder neck (separate procedure)	\$41.33	\$38.00	\$11.52		\$38.00	\$1.02
CPT CODE		Transurethral resection or prostate, including control of postoperative bleeding	\$47.94	\$38.00	\$14.35	\$67.64	\$67.64	N.A.
APG#	237	PROCEDURES FOR PREGNANCY & NEONATAL CARE				1		
CPT CODE		Treatment of spontaneous abortion, first trimester, complete	\$21.58	\$22.80	\$6.00		\$22.80	\$5.58
CPT CODE	59820	Treatment of missed abortion, any trimester, completed medic	\$19.00	\$15.20	\$5.80	\$21.03	\$22.80	\$5.15
APG#	238	THERAPEUTIC ASORTION						
CPT CODE	59840	Legal (therapeutic ) abortion, by dilation and curettage, an	\$20.69	\$22.80	\$6.33		\$19.00	\$3.80
CPT CODE	59841	Legal (therapeutic) abortion, by dilation and evacuation	\$21.91	\$23.18	\$3.31	\$23.05	\$22.80	\$0.39
APG#	240	FEMALE GENITAL ENDOSCOPY						
CPT CODE	58980	Laparoscopy for visualization of pelvic viscera	\$46.47	\$41.80	\$8.48	\$44.60	\$41.80	\$9.03
CPT CODE:	58985	Laparoscopy for visualization of pelvic viscera, with lysis of adhesions	\$48.51	\$45.60	\$15.29	\$50.40	\$45.60	\$18.54
APG# :	241	COLPOSCOPY						Ī
CPT CODE	57452	Colposcopy (vaginoscopy); (separate procedure)	\$30.88	\$30.40	\$1.34	\$30.82	\$30.40	\$1.27
CPT CODE		Colposcopy (vaginoscopy); with biopsies, or biopsy of the cervix	\$29.43	\$30.40	\$8.67	\$32.68	\$34.20	\$2.08
APG#		MISC. FEMALE REPRODUCTIVE PROCEDURES						
CPT CODE		Biopsy of vulva (separate procedure)	\$30.50	\$26.60	\$10.87	\$30.40	\$26.60	\$5.80
CPT CODE		Biopsy of cervix, circumferential (cone) with or without dilation	\$25.66	\$24.32	\$3.71	\$30.98	\$34.20	\$6.51
APG#		DILATION & CURETTAGE						
CPT CODE		Dilation and curettage of cervical stump	\$29.36	\$32.30	\$7.54	\$23.05	\$26.60	\$6.81
CPT CODE		Dilation and curettage of cervicus stump  Dilation and curettage, diagnostic and/or therapeutic (nonobstetrical)	\$28.75	\$31.16	\$6.62		\$30.40	\$10.31
APG#		FEMALE GENITAL EXCISION & REPAIR					1	
		Vulvectomy; partial, unilateral or bilateral (less than 80%)	\$45,60	\$34.20	\$20,55	\$35.29	\$34.20	\$4.76
CPT CODE								

		MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT EQUIPMENT COSTS		Hospitals			A.S.C.s	
				nospitais	Standard		A.3.0.5	Standard
SURGICAL		ARO A ROT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
PROCEDURES		APG & CPT DESCRIPTION	iviean	Median	Deviation	iviean	Median	Deviation
APG#		ELECTROENCEPHALOGRAM	470.00	\$68,40	\$11.74	A1 A	N.A.	N.A.
CPT CODE		Electroencephalogram (EEG) including recording awake, drowsy	\$70.30		\$224.46		N.A.	N.A.
CPT CODE		Polysomnography (recording, analysis and interpretation of t	\$518.70	\$627.00	\$224.46	N.A.	N.A.	N.A.
APG#		NERVE & MUSCLE TESTS						
CPT CODE		Nerve conduction, velocity and/or latency study; motor, each nerve	\$11.40	\$7.60	\$7.60	N.A.	N.A.	N.A.
CPT CODE		Nerve conduction, velocity and/or latency study; sensory, each nerve	\$13.68	\$7.60	\$8.33	N.A.	N.A.	N.A.
APG#		INJECTION OF SUBSTANCE INTO SPINAL CORD						
CPT CODE		Injection of anesthetic substance (including narcotics), diagnostic or therapeutic epidural, lumbar, caudal,	\$11.94	\$11.40	\$1.44	\$21.17		\$21.25
CPT CODE	62289	Injection of substance other than anesthetic, contrast, or n	\$19.00	\$19.00	\$3.80	\$26.60	\$15.20	\$26.65
APG#	266	NERVE INJECTION & STIMULATION						
CPT CODE	64510	Injection, anesthetic agent; stellate ganglion (cervical sympathetic)	\$21.85	\$24.70	\$7.19		\$15.20	\$18.12
CPT CODE	64520	Injection, anesthetic agent; lumbar or thoracic (paravertebral, sympathetic)	\$26.06	\$22.80	\$20.51	\$27.36	\$22.80	\$6.24
APG#	267	REVISION & REMOVAL OF NEUROLOGICAL DEVICE						
CPT CODE	63660	Revision or removal of spinal neurostimulator electrodes	\$57.00	\$57.00	\$11.40	\$22.80	\$22.80	N.A.
CPT CODE	63688	Revision or removal of spinal neurostimulator receiver	\$53.20	\$49.40	\$10.75	\$45.60	\$45.60	N.A.
APG#	269	CARPAL TUNNEL RELEASE						
CPT CODE		Neuroplasty and/or transposition; median nerve at carpal tun	\$46.99	\$45.60	\$8.35	\$40.70	\$44.84	\$10.48
APG#		NERVE REPAIR & DESTRUCTION						
CPT CODE		Neuroplasty and/or transposition ulnar nerve at elbow	\$61.68	\$57.00	\$15.83	\$62.51	\$53.20	\$22.80
CPT CODE		Neuroplasty and/or transposition; ulnar nerve at wrist	\$67.23	\$57.00	\$44.87	\$50,44		\$16.31
APG#		COMPLEX NERVE REPAIR	101100	101100	7	100111	1.01.0	
CPT CODE		Suture of digital nerve, hand or foot; one nerve	\$61.94	\$62.70	\$16.52	\$48.86	\$45.60	\$14.29
CPT CODE		Suture of one nerve, hand or foot; common sensory nerve	\$64.60	\$68.40	\$16.89	\$50.67		\$11.69
APG#		SPINAL TAP	10.100	100110	1.0.00	100.01	1 10110	
CPT CODE		Spinal puncture, lumbar, diagnostic	\$18.05	\$15.20	\$3.93	N A	N.A.	N.A.
CPT CODE		Spinal puncture, therapeutic, for drainage of spinal fluid (	\$22.80	\$22.80	\$7.60		N.A.	N.A.
APG#		SIMPLE LASER EYE PROCEDURES	V22.00	V22.00	47.00	141751	14.75.	141751
			\$42.18	\$45.60	\$10,81	610.12	\$11,40	\$2.19
CPT CODE		Trabeculoplasty by laser surgery, one or more sessions	\$36.10	\$45.60	\$11.74	\$25.63	\$22.80	\$12.98
CPT CODE		Discission of secondary membraneous cataract, and/or anterio	\$30.10	945.00	911.74	925.03	\$22.00	\$12.50
APG#		COMPLEX LASER EYE PROCEDURES	\$108.30	\$74.10	\$89.52	\$101.33	\$98,80	\$34.27
CPT CODE		Repair of retinal detachment, one or more sessions, photocoagulation, with(out) drainage of subretinal fl	\$45.60	\$45.60	\$9.31	\$101.33		\$34.21
CPT CODE		Destruction of extensive or progressive retinopathy (e.g., diabetic retinopathy) one or more sessions; ph	\$45.60	\$45.60	\$9.31	\$10.13	\$11.40	\$2.15
APG#	291	CATARACT PROCEDURES			10.00	4.0.00	150.00	
CPT CODE		Removal of lens material; phacofragmentation technique	\$49.40	\$45.60	\$6.82		\$53.20	\$18.67
CPT CODE		Extraction of lens with or without iridectomy; extracapsular	\$35.15	\$22.80	\$17.02		\$22.80	\$19.77
CPT CODE		Intracapsular cataract extraction with insertion of intraocular lens prosthesis	\$55.73	\$68.40	\$16.79		\$36.10	\$9.78
CPT CODE	66984	Extracapsular cataract removal with insertion of intraocular	\$54.65	\$63.46	\$15.73	\$41.04		\$12.17
CPT CODE		Insertion of intraocular lens subsequent to cataract removal	\$32.57	\$22.80	\$14.52	\$35.97	\$37.24	\$8.5
APG#	292	SIMPLE ANTERIOR SEGMENT EYE PROCEDURES FOR GLAUCOMA						
CPT CODE	66500	Iridotomy by stab incision (separate procedure); except transfixion	\$25.84	\$22.80	\$11.21	\$26.60	\$26.60	\$6.94
CPT CODE	66720	Cyclocryotherapy initial	\$39.90	\$39.90	\$8.06	\$29.64	\$26.60	\$9.0
APG#	293	COMPLEX ANTERIOR SEGMENT EYE PROCEDURES FOR GLAUCOMA						
CPT CODE	66150	Fistulization of sclera for glaucoma; trephination with iridectomy	\$48.13	\$45.60	\$4.39	\$38.00		\$13.16
CPT CODE		Fistulization of sclera for glaucoma trabeculectomy ab externo	\$49.51	\$45.60	\$6.51	\$40.43	\$45.60	\$10.57
APG#		SIMPLE ANTERIOR SEGMENT EYE PROCEDURES EXCEPT FOR GLAUCOMA						
CPT CODE		Destruction of lesion of cornea by cryotherapy, photocoagulation or thermocauterization	\$34.20	\$34.20	\$11.40	\$32.30	\$34.20	\$3.80
CPT CODE		Discussion or secondary membraneous cataract and/or anterior	\$36.63	\$45.60	\$20.34		\$32.30	\$14.22
APG#		MODERATE ANTERIOR SEGMENT EYE PROCEDURES						

		MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT EQUIPMENT COSTS		Hospitals			A.S.C.s	
•				Tioapitaia	Standard		Aldidio	Standard
SURGICAL		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
PROCEDURES		Iridectomy, w/corneoscleral or corneal section; peripheral of glaucoma (separate procedure)	\$29.45	\$28.50	\$13.30	\$25.08		\$12.04
CPT CODE	66625	Removal of secondary membraneous cataract, with corneoscleral section, with(out) iridectomy	\$35.25	\$34.20	\$20.67	\$45.60		
CPT CODE	66830	COMPLEX ANTERIOR SEGMENT EYE PROCEDURES EXCEPT FOR GLAUCOMA	400120	101120	10000			
APG#	296	Keratoplasty, penetrating, includes autografts and fresh or preserved grafts	\$45.60	\$45.60	\$0.00	\$68.46	\$72.96	\$13.05
CPT CODE	65/50	Removal of vitreous, anterior approach; subtotal removal with mechanical vitrectomy	\$49,40	\$49.40	\$16.32		\$49.40	\$3.17
CPT CODE	67010	Removal of vitreous, anterior approach; subtotal removal with medianical vitrectomy	¥43.40	V40.40	V10.52	¥40.00	440.40	
APG#	297	SIMPLE POSTERIOR SEGMENT EYE PROCEDURES	\$45.60	\$45.60	\$11.40	N A	N.A.	N.A.
CPT CODE	67208	Destruction of localized lesion of retina (e.g., maculopathy, choroidopathy, small tumors), one or more s	\$51.30	\$51.30	\$8.06	\$20.90		\$18.81
CPT CODE	67227	Destruction of extensive or progressive retinopathy (e.g., diabetic retinopathy, one or more sessions; cry	\$51.30	\$51.30	\$6.00	\$20.50	720.50	710.01
APG#		COMPLEX POSTERIOR SEGMENT EYE PROCEDURES	\$60.80	\$45.60	\$37.23	\$59.85	\$45.60	\$32.10
CPT CODE	67036	Vitrectomy, mechanical, pars plana approach		\$91.20	\$54.32	\$86.13		\$15.82
CPT CODE	67101	Repair of retinal detachment, one or more sessions, cryotherapy or diathermy, with(out) drainage of subr	\$103.87	\$91.20	\$54.32	900.13	\$91.20	913.02
APG#		STRABISMUS & MUSCLE EYE PROCEDURES	444.00	\$34.20	\$13.30	\$38.14	\$34,20	\$8.66
CPT CODE		Strabismus surgery on patient not previously operated on, an	\$44.33					\$16.23
CPT CODE		Strabismus surgery on patient not previously operated on; an	\$48.13	\$45.60	\$9.50	\$51.12	\$45.60	\$10.23
APG#		SIMPLE REPAIR & PLASTIC PROCEDURES OF EYE		100.00	447.04	400.05	\$22.80	\$11.38
CPT CODE		Excision of lesion of eye lid without closure or with simple	\$39.90	\$39.90	\$17.24	\$26.35	\$34.20	\$10.32
CPT CODE		Repair of entropion suture	\$39.90	\$34.20	\$12.31	\$37.62	\$34.20	\$10.32
APG#	301	COMPLEX REPAIR & PLASTIC PROCEDURES OF EYE			-			11001
CPT CODE	67904	Repair of blepharoptosis (tarso)-levator resection or advancement, external approach	\$62.57	\$62.32	\$15.82	\$59.61	\$62.32	\$16.64
CPT CODE		Dacryocystorhinostomy (fistulization of lacrimal sac to nasal cavity)	\$88.67	\$91.20	\$7.60	\$81.87	\$91.20	\$18.25
APG#	313	OTORHINOLARYNGOLOGIC FUNCTION TESTS		-				_
CPT CODE		Oscillating tracking test, with recording	\$34.20	\$34.20		N.A.	N.A.	N.A.
CPT CODE	92585	Brainstem evoked response recording (evoked response (EEG) audiometry)	\$70.49	\$68.40	\$15.39	N.A.	N.A.	N.A.
APG#	314	MAJOR EXTERNAL EAR PROCEDURES						
CPT CODE		Excision exostosis (es), external auditory canal	\$44.33	\$38.00	\$12.18	\$38.00	\$38.00	\$0.00
CPT CODE	69310	Reconstruction of external auditory canal (meatoplasty), separate procedure	\$58.27	\$57.00	\$30.65	\$74.10	\$74.10	\$24.18
APG#	315	TYMPANOSTOMY & OTHER SIMPLE MIDDLE EAR PROCEDURES						
CPT CODE	69420	Myringotomy including aspiration and/or eustachian tube inflation requiring general anesthesia	\$26.19	\$26.60	\$6.38	\$25.22	\$22.80	\$14.04
CPT CODE	69433	Tympanostomy (requiring insertion of ventilating tube), local or topical anesthesia	\$19.00	\$19.00	\$3.80	\$16.24	\$15.20	\$2.99
APG#	316	TYMPANOPLASTY & OTHER COMPLEX MIDDLE EAR PROCEDURES						1
CPT CODE	69631	Tympanoplasty w/o mastoidectomy (including canalplasty, atticotomy and/or middle ear surgery), initial	\$80.15	\$68.40	\$21.05	\$72.20	\$68.40	\$12.85
CPT CODE	69660	Stapedectomy with re-establishment of ossicular continuity, with(out) use of foreign material	\$102.60	\$91.20	\$32.24	\$102.98	\$91.20	\$23.56
APG#		SIMPLE AUDIOMETRY						
CPT CODE		8asic comprehensive audiometry	\$33.74	\$29.64	\$13.33	N.A.	N.A.	N.A.
CPT CODE		Tympanometry	\$7.90	\$7.60	\$0.68	N.A.	N.A.	N.A.
APG#	219	REMOVAL OF IMPACTED CERUMEN						
CPT CODE		Removal impacted cerumen (separate procedure), one or both ears	\$19.00	\$19.00	\$4.16	\$15.96	\$15.20	\$1.70
			\$45.68	\$43.44	\$13.80	429.07	\$37.46	\$10.01
		AGGREGATE MEAN FOR ALL SURGICAL PROCEDURES	345.68	\$43.44	₹13.80	938.97	1937.40	1 910.0

				Hospitals			A.S.C.s	
SURGICAL					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	124	BLOOD & SLOOD PRODUCT EXCHANGE						
CPT CODE		Exchange transfusion, blood, other than newborn	\$45.60	\$45.60	N.A.	N.A.	N.A.	N.A.
CPT CODE	36530	Therapeutic apheresis (plasma and/or cell exchange)	\$146.93	\$136.80	\$121.92	N.A.	N.A.	N.A.
APG#		ALLERGY TESTS AND IMMUNOTHERAPY						
CPT CODE	05001	Percutaneous tests (scratch, puncture, prick) with allergenic extracts, immediate type reaction, specify n	\$30.40	\$30.40	N.A.	N.A.	N.A.	N.A.
APG#		PERITONEAL DIALYSIS						
	107	Dialysis procedure other than hemodialysis (eg, peritoneal, hemofiltration), with single physician evaluation	\$478.80	\$478.80	\$161.22	N.A.	N.A.	N.A.
CPT CODE	90945	Dialysis procedure other than hemodialysis (eg, peritoreal, hemofiltration) requiring repeated evaluations,	\$752.40	\$752.40	N.A.	N.A.	N.A.	N.A.
CPT CODE	90947	PROCEDURES FOR PREGNANCY & NEONATAL CARE						
APG#			\$45.60	\$45.60	N.A.	N.A.	N.A.	N.A.
CPT CODE	59025	Fetal non-stress test Initiation and/or supervision of internal fetal monitoring during labor by consultant with report (separate p	\$7.60	\$7.60	N.A.	N.A.	N.A.	N.A.
CPT CODE								
APG#	262	ELECTROCONVULSIVE THERAPY	\$34.20	\$34.20	N.A.	N.A.	N.A.	N.A.
CPT CODE	90870	Electroconvulsive therapy (includes necessary monitoring); single seizure	\$34.20	\$34.20	N.A.	N.A.	N.A.	N.A.
CPT CODE		Electroconvulsive therapy (includes necessary monitoring); multiple seizures, per day	V04.20	704120	1404			
APG#		SUBDURAL & SUBARACHNOID TAP	\$34.20	\$34.20	N.A.	N.A.	N.A.	N.A.
CPT CODE	62225	Replacement or irrigation, ventricular catheter	\$81.70	\$81.70	\$18.81	N.A.	N.A.	N.A.
CPT CODE	63744	Replacement, irrigation or revision of lumbosubarachnoid shunt	\$81.70	\$81.70	\$10.01	N.A.	N.A.	IN.A.
APG#		NEUROSTIMULATOR AND VENTRICULAR SHUNT IMPLANTATION	470.00	\$79.80	\$16.12	N.A.	N.A.	N.A.
CPT CODE	63650	Percutaneous implantation of neurostimulator electrodes; epidural	\$79.80					
CPT CODE	64560	Percutaneous implantation of neurostimulator electrodes; autonomic nerve	\$68.40	\$68.40	N.A.	\$49.40	\$49.40	N.A.
APG#	287	MINOR OPTHALMOLOGICAL TESTS & PROCEDURES	-			-		- 11.4
CPT CODE	92235	Ophthalmoscopy, with medical diagnostic evaluation; with fluorescein angiography (includes multiframe	\$34.20	\$34.20	N.A.	N.A.	N.A.	N.A.
APG#		INNER EAR PROCEDURES						-
CPT CODE		Endolymphatic sac operation; with shunt	\$78.53	\$68.40	\$17.55	N.A.	N.A.	N.A.
CPT CODE		Revision fenestration operation	\$68.40	\$68.40	N.A.	\$45.60	\$45.60	N.A.

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MEAN, MEDIAN, STANDARD DEVIATION & COUNT FOR INDIRECT EQUIPMENT COSTS - SURGICAL PROCEDURES

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ME	AN, MEDIAN, S	TANDARD DE	VIATION & CO	DUNT FOR IND	IRECT EQUIP	MENT COSTS	- SURGICAL	PROCEDURES	
	T		Hosp				A.S	.C.s	
SURGICAL				Standard				Standard	
PROCEDURES		Mean	Median	Deviation	Count	Mean	Median	Deviation	Count
CPT CODE	54152	\$41.17	\$45.60	\$9.74	6	\$25.84	\$26.60	\$8.06	6
CPT CODE	54161	\$36.88	\$34.20	\$10.30	17	\$36.57	\$34.20	\$7.58	16
APG#	213								
CPT CODE	55700	\$24.80	\$22.80	\$4.63	24	\$22.80	\$22.80	\$0.00	6
OPT CODE	55705	\$22.80	\$19.00	\$7.06	12	\$20.90	\$19.00	\$4.65	6
APG#	214								
CPT CODE	52500	\$41.33	\$38.00	\$11.52	16	\$37.54	\$38.00	\$1.02	5
CPT CODE	52601	\$47.94	\$38.00	\$14.35	13	\$67.64	\$67.64	N.A.	1
APG#	236								
CPT CODE	59025	\$45.60	\$45.60	N.A.	1	N.A.	N.A.	N.A.	
CPT CODE	59050	\$7.60	\$7.60	N.A.	. 1	N.A.	N.A.	N.A.	
APG#	237								
CPT CODE	59801	\$21.58	\$22.80	\$6.00	10	\$21.20	\$22.80	\$5.58	9
CPT CODE	59820	\$19.00	\$15.20	\$5.80	13	\$21.03	\$22.80	\$5.15	15
APG#	238								
CPT CODE	59840	\$20.69	\$22.80	\$6.33	9	\$19.00	\$19.00	\$3.80	7
CPT CODE	59841	\$21.91	\$23.18	\$3.31	6	\$23.05	\$22.80	\$0.39	6
APG#	240								
CPT CODE	58980	\$46.47	\$41.80	\$8.48	21	\$44.60	\$41.80	\$9.03	19
CPT CODE	58985	\$48.51	\$45.60	\$15.29	18	\$50.40	\$45.60	\$18.54	16
APG#	241								
CPT CODE	57452	\$30.88	\$30.40	\$1.34	8	\$30.82	\$30.40	\$1.27	9
CPT CODE	57454	\$29.43	\$30.40	\$8.67	11	\$32.68	\$34.20	\$2.08	5
APG#	242			*					
CPT CODE	56600	\$30.50	\$26.60	\$10.87	15	\$30.40	\$26.60	\$5.80	13
CPT CODE	57520	\$25.66	\$24.32	\$3.71	17	\$30.98	\$34.20	\$6.51	21
APG#	243								
CPT CODE	57820	\$29.36	\$32.30	\$7.54	24	\$23.05	\$26.60	\$6.81	3
CPT CODE	58120	\$28.75	\$31.16	\$6.62	23	\$29.36	\$30.40	\$10.31	16
APG#	244							1	
CPT CODE	56620	\$45.60	\$34.20	\$20.55	9	\$35.29	\$34.20	\$4.76	7
CPT CODE	57135	\$34.20	\$28.50	\$12.02	14	\$30.72	\$26.60	\$9,92	12
APG#	261								
CPT CODE	95819	\$70.30	\$68.40	\$11.74	16	N.A.	N.A.	N.A.	
CPT CODE	95828	\$518.70	\$627.00	\$224.46	6	N.A.	N.A.	N.A.	
APG#	262								
CPT CODE	90870	\$34.20	\$34.20	N.A.	1	N.A.	N.A.	N.A.	
CPT CODE	90871	\$34.20	\$34.20	N.A.	1	N.A.	N.A.	N.A.	
APG#	263								
CPT CODE	95900	\$11.40	\$7.60	\$7.60	5	N.A.	N.A.	N.A.	
CPT CODE	95904	\$13.68	\$7,60	\$8.33	8	N.A.	N.A.	N.A.	
APG#	264								
CPT CODE	62278	\$11.94	\$11.40	\$1.44	7	\$21.17	\$11.40	\$21.25	7
CPT CODE	62289	\$19.00	\$19.00	\$3.80	3	\$26.60	\$15.20	\$26.65	6
APG#	265								

ME	AN, MEDIAN, S	STANDARD DE	VIATION & C	OUNT FOR INC	IRECT EQUI	PMENT COSTS	- SURGICAL	<b>PROCEDURES</b>	
			Hos	pitals			A.5	S.C.s	
SURGICAL				Standard				Standard	
PROCEDURES		Mean	Median	Deviation	Count	Mean	Median	Deviation	Count
CPT CODE	62225	\$34.20	\$34.20	N.A.	. 1	N.A.	N.A.	N.A.	
CPT CODE	63744	\$81.70	\$81.70	\$18.81	2	N.A.	N.A.	N.A.	
APG#	266								
CPT CODE	64510	\$21.85	\$24.70	\$7,19	4	\$21.53	\$15.20	\$18.12	9
CPT CODE	64520	\$26.06	\$22.80	\$20.51	7	\$27.36	\$22.80	\$6.24	5
APG#	267								
CPT CODE	63660	\$57.00	\$57.00	\$11.40	3	\$22.80	\$22.80	N.A.	1
CPT CODE	63688	\$53.20	\$49.40	\$10.75	4	\$45.60	\$45.60	N.A.	1
APG#	268								
CPT CODE	63650	\$79.80	\$79.80	\$16.12	2	N.A.	N.A.	N.A.	
CPT CODE	64560	\$68.40	\$68.40	N.A.	1	\$49.40	\$49.40	N.A.	1
APG#	269								
CPT CODE	64721	\$46.99	\$45.60	\$8.35	24	\$40.70	\$44.84	\$10.48	20
APG#	270								
CPT CODE	64718	\$61.68	\$57.00	\$15.83	13	\$62.51	\$53.20	\$22.80	12
CPT CODE	64719	\$67.23	\$57.00	\$44.87	13	\$50.44	\$49.40	\$16.31	11
APG#	271	T							
CPT CODE	64831	\$61.94	\$62.70	\$16.52	10	\$48.86	\$45.60	\$14.29	7
CPT CODE	64834	\$64.60	\$68.40	\$16.89	9	\$50.67	\$49.40	\$11.69	6
APG#	272								
CPT CODE	62270	\$18.05	\$15.20	\$3.93	8	N.A.	N.A.	N.A.	
CPT CODE	62272	\$22.80	\$22.80	\$7.60	3	N.A.	N.A.	N.A.	
APG#	287								
CPT CODE	92235	\$34.20	\$34.20	N <sub>7</sub> A.	1	N.A.	N.A.	N.A.	
APG#	289								
CPT CODE	65855	\$42.18	\$45.60	\$10.81	10	\$10.13	\$11.40	\$2.19	3
CPT CODE	66821	\$36.10	\$45.60	\$11.74	12	\$25.63	\$22.80	\$12.98	12
APG#	290								
CPT CODE	67105	\$108.30	\$74.10	\$89.52	4	\$101.33	\$98.80	\$34.27	4
CPT CODE	67228	\$45.60	\$45.60	\$9.31	4	\$10.13	\$11.40	\$2.19	3
APG#	291								
CPT CODE	66850	\$49.40	\$45.60	\$6.82	19	\$48.39	\$53.20	\$18.67	9
CPT CODE	66940	\$35.15	\$22.80	\$17.02	16	\$37.24	\$22.80	\$19.77	10
CPT CODE	66983	\$55.73	\$68.40	\$16.79	18	\$37.24	\$36.10	\$9.78	10
CPT CODE	66984	\$54.65	\$63.46	\$15.73	22	\$41.04	\$38.00	\$12.17	23
CPT CODE	66985	\$32.57	\$22.80	\$14.52	20	\$35.97	\$37.24	\$8.51	18
APG#	292								
CPT CODE	66500	\$25.84	\$22.80	\$11.21	5	\$26.60	\$26.60	\$6.94	4
CPT CODE	66720	\$39.90	\$39.90	\$8.06	2	\$29.64	\$26.60	\$9.07	5
APG#	293								
CPT CODE	66150	\$48.13	\$45.60	\$4.39	3	\$38.00	\$45.60	\$13.16	3
CPT CODE	66170	\$49.51	\$45.60	\$6.51	7	\$40.43	\$45.60	\$10.57	10
APG#	294								
CPT CODE	65450	\$34.20	\$34.20	\$11.40	3	\$32.30	\$34.20	\$3.80	4
CPT CODE	66820	\$36.63	\$45.60	\$20.34	5	\$30.40	\$32.30	\$14.22	4

		MEAN, MEDIAN, & STANDARD DEVIATION FOR OVERHEAD COSTS - SU	JAGICAL		OTILO		4.0.0	
-				Hospitals			A.S.C.s	
SURGICAL	1				Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	2							
CPT CODE	19000		\$73.57	\$59.56	\$46.89	\$76.64	\$45.68	\$75.05
CPT CODE		Siopsy of breast, needle (separate procedure)	\$143.98	\$125.50	\$76.84	\$167.16		\$173.60
CPT CODE	60100	Biopsy, thyroid, percutaneous needle	\$63.22	\$63.22	\$3.16	\$164.12	\$164.12	N.A.
APG#	3	SIMPLE INCISION & DRAINAGE						
CPT CODE	10000	Incision and drainage of infected or noninfected sebaceous cyst	\$100.02	\$65.26	\$96.32	\$112.17	\$65.26	\$104.11
CPT CODE	10060	Incision and drainage of abscess (e.g., carbuncle)	\$110.90	\$75.37	\$93.06	\$98.10	\$53.62	\$87.73
CPT CODE	10120	Incision & removal of foreign body subcutaneous tissues; simple	\$108.41	\$66.97	\$103.80	\$119.25	\$111.54	\$89.13
APG#	4	COMPLEX INCISION AND DRAINAGE			1			
CPT CODE	10141	Incision and drainage of hematoma; complicated	\$164.79	\$102.78	\$173.41	\$182.84	\$163.42	\$139.78
CPT CODE		Incision and drainage, complex, post-operative wound infection	\$162.29	\$102.78		\$199.23	\$188.19	\$161.09
CPT CODE		Incision and drainage, upper arm or elbow area; infected bur	\$190.95	\$102.78	\$223.83		\$66.38	\$163.17
CPT CODE	28002	Deep dissection below fascia, for deep infection of foot, with(out) tendon sheath involvement; singl	\$108.45	\$67.47	\$90.88	\$93.41	\$56.48	\$99.92
APG#	5	COMPLEX INCISION AND DRAINAGE						
CPT CODE		Debridement of nails, manual; five or less	\$72.33	\$54.34	\$48.81	\$98.56	\$80.46	\$84.65
CPT CODE		Debridement of nails, manual each additional; five or less	\$89.34	\$70.15	\$70.42	\$115.13	\$121.06	\$90.38
APG#	6	SIMPLE DESRIDEMENT & DESTRUCTION						
CPT CODE		Debridement of skin, partial thickness	\$120.46	\$69.58	\$138.96	\$139.19	\$104.84	\$123.65
CPT CODE		Avulstion of nail plate, partial or complete, simple; single	\$103.77	\$53.18	\$164.76	\$97.46	\$91.86	\$77.07
CPT CODE		Destruction by any method, with or without surgical curettement	\$113.25	\$93.33	\$75.91	\$123.10	\$108.91	\$101.61
CPT CODE		Removal of implant superficial, (e.g., buried wire, pin or rod	\$183.57	\$102.78	\$176.49	\$181.59	\$169.26	\$130.77
APG#	7	SIMPLE EXCISION & BIOPSY						
CPT CODE		Excision, benign lesion, except skin tag, trunk, arms or leg	\$121.27	\$82.44	\$98.09	\$130.95	\$139.52	\$91.46
CPT CODE	11440	Excision, other benign lesion (unless listed elsewhere); face, ears, eyelids, nose, lips, mucous mem	\$139.67	\$140.80	\$104.45	\$147.05	\$161.06	\$91.23
CPT CODE		Excision, malignant lesion; trunk, arms or legs; lesion diameter .6 - 1.0 cm	\$119.11	\$102.38	\$92.73	\$124.97	\$126.65	\$80.64
CPT CODE		Excision, malignant lesion, face, ears, eyelids, nose, lips;	\$137.68	\$140.45	\$103.65	\$139.65	\$155.48	\$87.64
APG#	8	COMPLEX EXCISION, BIOPSY & DEBRIDEMENT						
CPT CODE		Excision, benign lesion, except skin tag (unless listed else	\$136.80	\$116.18	\$124.55	\$142.82	\$126.65	\$126.46
CPT CODE		Excision, benign lesion, except skin tag (unless listed else	\$126.27	\$99.31	\$93.53	\$156.19	\$150.45	\$109.54
CPT CODE		Excision, malignant, lesion, face, ears, eyelids, nose, lips	\$140.39	\$109.56	\$111.19	\$128.57	\$132.12	\$91.43
APG#	9	LIPECTOMY & EXCISION WITH RECONSTRUCTION						
CPT CODE		Excision, excessive skin and subcutaneous tissue	\$155.13	\$129.53	\$116.78	\$249.98	\$280.39	\$155.90
CPT CODE		Excision, leg pressure ulcer, with local skin flap(s)	\$291.87	\$168.04	\$334.31	\$132.27	\$112.44	\$96.87
		Ligation and division and completion of strip. of long or short saphenous veins with radical excision	\$268.88	\$216.99	\$156.82	\$196.98	\$145.19	\$171.13
CPT CODE	10	SIMPLE SKIN REPAIR	VE00100	10.00				
APG#		Simple repair of superficial wounds of scalp, neck, axillae	\$108.24	\$70.75	\$85.57	\$133.46	\$104.84	\$116.48
CPT CODE			\$120.40	\$102.78	\$81,71	\$158.15	\$177.98	
CPT CODE		Simple repair of superficial wounds of scalp, neck, axillae, Layer closure of wounds of scalp axillae, trunk and/or extremities (excluding hands and feet); 2.5c	\$110.93	\$73.94	\$94.53	\$189.29	\$243.36	\$136.58
CPT CODE		COMPLEX SKIN REPAIR	V110.55	V/0.04	404.00	+1001E0	42 10100	1100101
APG#	11		\$107.44	\$78.33	\$73.60	\$120.26	\$78.31	\$122.26
CPT CODE		Simple repair or superficial wounds of face, ears, eyelids,	\$138.58	\$95.90	\$94,19	\$155.83	\$102.79	
CPT CODE	12017	Simple repair or superficial wounds of face, ears, eyelids,  Layer closure of wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.5cm or less		\$106.87	\$115.87	\$99.18	\$66.01	\$102.88
CPT CODE			\$216.74	\$202.45	\$147.42	\$245.37	\$220.01	\$146.99
CPT CODE		Blepharoplasty, upper eyelid	4210.74	VZUZ.43	V147.42	72.70.37	V220.01	¥ 1-40.00
APG#	12	SKIN & INTEGUMENT GRAFT, TRANSFER & REARRANGEMENT	\$234.24	\$168.72	\$171.83	\$228.02	\$203.06	\$163.91
CPT CODE	14060	Adjacent tissue transfer or rearrangement, eyelids, nose, ears and/or lips; defect 10 sq. cm or less	\$188.10	\$168.72	\$105.40	\$220.61	\$203.06	\$159.70
CPT CODE		Split graft, trunk, scalp, arms, legs, hands, and/or feet; 1	\$188.10		\$105.40	\$325.49	\$306.08	\$200.46
CPT CODE		Full thickness graft, free, including direct closure of donor	9204.17	9100.07	9206.98	9325.49	4300.00	7200.46
APG#	27	SIMPLE INCISION & EXCISION OF BREAST						

		MEAN, MEDIAN, & STANDARD DEVIATION FOR OVERHEAD COSTS - SI	URGICAL	PROCEE	URES			
				Hospitals			A.S.C.s	
SURGICAL					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
CPT CODE	19101	Biopsy of breast, incisional	\$163.87	\$104.49	\$119.94	\$179.19	\$157.63	\$141.19
CPT CODE		Excision or cyst, fibroadenoma, or other benign or malignant	\$200.66	\$130.52	\$156.73	\$217.99	\$189.36	\$167.20
APG#	28	BREAST RECONSTRUCTION & MASTECTOMY						
CPT CODE		Mastectomy for gynecomastia through circular or other incision	\$219.32	\$129.27	\$215.46	\$212.91	\$193.60	\$147.76
CPT CODE		Mastectomy, partial	\$222.72	\$186.89	\$147.83	\$185.18	\$183.55	\$115.98
CPT CODE		Mastectomy, subcutaneous	\$169.45	\$103.94	\$142.13	\$211.32	\$158.47	\$175.38
APG#	53	OCCUPATIONAL THERAPY			1			
CPT CODE		Training in activities of daily living (self care skills and	\$14.27	\$5.19	\$21.46	N.A.	N.A.	N.A.
CPT CODE		Training in activities of daily living (self care skills and	\$9.92	\$3.24	\$14.75	N.A.	N.A.	N.A.
APG#	54	PHYSICAL THERAPY						
CPT CODE		Physical medicine treatment to one area hot or cold packs	\$10.59	\$6.42	\$14.92	N.A.	N.A.	N.A.
CPT CODE		Physical medicine treatment to one area, initial 30 minutes,	\$6.93	\$3.46	\$9.32	N.A.	N.A.	N.A.
APG#	55	DIAGNOSTIC ARTHROSCOPY						
CPT CODE		Arthroscopy, shoulder, diagnostic, with(out) synovial biopsy (separate procedure)	\$191.32	\$136.54	\$200.45	\$202.18	\$162.81	\$121.70
CPT CODE	29870	Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)	\$207.18	\$116.18	\$196.31	\$278.12	\$193.05	\$231.81
APG#	56	THERAPEUTIC ARTHROSCOPY						
CPT CODE		Arthroscopy, knee, surgical debridement/shaving of cartilage (chondroplasty)	\$220.68	\$125.18	\$210.22	\$265.83	\$216.15	\$210.61
CPT CODE	20881	Arthroscopy, knee, surgical with meniscectomy (medical or lateral including any meniscal shaving)	\$245.79	\$214.14	\$186.71	\$278.63	\$236.87	\$221.12
APG#	57	REPLACEMENT OF CAST						
CPT CODE		Application elbow to finger (short arm)	\$98.54	\$48.23	\$111.16	\$116.28	\$24.24	\$131.12
CPT CODE		Application	\$143.20	\$84.15	\$140.35	\$133.84	\$111.54	\$121.13
APG#		SPLINT, STRAPPING & CAST REMOVAL						
CPT CODE		Application of short arm splint (forearm to hand); static	\$103.99	\$61.86	\$108.84	\$115.49	\$67.89	\$117.30
CPT CODE		Strapping unna boot	\$67.04	\$71.12	\$59.68	\$151.86	\$151.86	N.A.
APG#	59	TREATMENT OF CLOSED FRACTURE & DISLOCATION OF FINGER, TOE & RIB						
CPT CODE		Treatment of rib fracture, closed, uncomplicated, each	\$60,97	\$56.39	\$44.38	N.A.	N.A.	N.A.
CPT CODE		Treatment of closed phalangeal shaft fracture, proximal or m	\$114,44	\$98.14	\$95.90	\$98.31	\$78.31	\$88.94
APG#	60	TREATMENT OF CLOSED FRACTURE & DISLOCATION EXCEPT FINGER, TOE & RIB						
CPT CODE		Treatment of closed distal radial fracture (e.g., Colles or Smith type) or epiphyseal separation, with	\$115,49	\$88.57	\$88.16	\$128.22	\$119.10	\$122.49
CPT CODE	25605	Treatment of closed distal radial fracture (e.g., Colles or Smith type) or epiphyseal separation, with	\$112.81	\$81.56	\$74.06	\$107.20	\$53.98	\$109.86
CPT CODE	28470	Treatment of closed metatarsal fracture without manipulation	\$101.28	\$44.55	\$119.97	\$102.39	\$24.24	\$158.39
APG#	62	TREATMENT OF OPEN FRACTURE & DISLOCATION EXCEPT FACE					-	
CPT CODE		Treatment of open distal radial fracture (e.g., Colles or Smith	\$298.05	\$168.04	\$255.45	\$152.86	\$113.07	\$132.23
CPT CODE		Open treatment of closed or open distal radial fracture (e.g.,	\$305.02	\$176.20	\$282.13	\$105.55	\$60.89	\$82.06
CPT CODE		Open treatment of closed or open phalangeal shaft fracture	\$286.16	\$217.02	\$253.44	\$218.97	\$135.13	\$208.79
APG#		JOINT MANIPULATION UNDER ANESTHESIA						
CPT CODE		Manipulation under anesthesia, shoulder joint, including app	\$118.11	\$76.29	\$113.82	\$112.61	\$104.44	\$91.11
CPT CODE		Manipulation of knee joint under general anesthesia (include	\$111.56	\$65.45	\$111.06	\$123.19	\$119.23	\$82.56
APG#	64	SIMPLE MAXILLOFACIAL PROCEDURES						
CPT CODE		Drainage of hematoma, nasal, internal approach	\$130.44	\$78.10	\$125.95	\$120.91	\$78.31	\$121.63
CPT CODE		Excision, nasal polyp(s), simple unilateral	\$134.14	\$92.82	\$116.24	\$164.81	\$119.10	\$153.89
CPT CODE		Excision, nasal polyp(s), simple dilateral		\$121.05	\$102.57	\$130.62	\$75.90	\$139.14
CPT CODE		Sinusotomy, maxillary (antrotomy); intranasal, unilateral	\$188.52		\$211.29	\$182.71	\$168.05	\$134.49
APG#	65	COMPLEX MAXILLOFACIAL PROCEDURES						
CPT CODE	20520	Septoplasty or submucous resection, with or without cartilage scoring, contouring or replacement	\$221.34	\$150.22	\$173.01	\$292.90	\$267.17	\$232.18
CPT CODE		Reconstruction, functional, internal nose (septal or other intranasal dermatoplasty)	\$275.83		\$230.92	\$304.53	\$267.17	\$248.08
APG#	66	INCISION OF BONE, JOINT, & TENDON						
CPT CODE		Tendon shoath incision at radial styloid for deQuervain's disease	\$175.96	\$111.20	\$172.04	\$162.99	\$130.40	\$123.82

		MEAN, MEDIAN, & STANDARD DEVIATION FOR OVERHEAD COSTS - S					A.S.C.s	
	1			Hospitals	Canada		A.S.U.\$	Standar
SURGICAL				14-die	Standard	Mann	Median	Deviation
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	\$119.10	\$162.3
CPT CODE	28270	Capsulotomy for contracture; metatarso-phalangeal joint, with(out) tenorrhaphy, single, joint, each j	\$228.50	\$125.72	\$248.51	\$186.27	\$119.10	\$102.3
APG#	67	BUNION PROCEDURES					1000.00	4000
CPT CODE	28290	Hallux valgus (bunion) correction, with or without sesamoidectomy; simple exostectomy (Silver typ	\$179.43	\$126.36	\$163.75	\$295.33	\$282.29	\$262.
CPT CODE	28292	Hallux valgus (bunion) correction, with or without sesamoidectomy; simple exostectomy (Keller, Mc	\$236.85	\$150.23	\$244.69	\$253.93	\$168.05	\$207.7
APG#	68	EXCISION OF 80NE, JOINT & TENDON OF THE HAND & FOOT						
CPT CODE	26160	Excision or lesion of tendon sheath or capsule (e.g., cyst, mucous cyst, ganglion), hand or finger	\$177.63	\$116.18	\$166.36	\$181.56		\$149.3
CPT CODE	28080	Excision of interdigital (Morton) neuroma, single, each	\$147.65	\$110.94	\$106.75	\$197.22	\$190.88	\$140.
APG#	69	EXCISION OF 80NE , JOINT & TENDON EXCEPT HAND & FOOT						
CPT CODE		Excision, olecranon bursa	\$161.07	\$99.19	\$145.82		\$180.18	\$118.
CPT CODE		Excision of synovial cyst of popiteal space (Baker's cyst)	\$127.23	\$87.52	\$112.25	\$187.44	\$161.21	\$136.
APG#	70	ARTHROPLASTY	1					
CPT CODE		Interposition arthroplasty, intercarpal or carpometacarpal joints	\$242.49	\$163.46		\$148.77		\$105.6
CPT CODE		Arthroplasty interphalangeal joint; single, each	\$195.12	\$156.78	\$164.69	\$119.43	\$56.62	\$105.0
APG#	71	HAND & FOOT TENOTOMY						
CPT CODE		Tenotomy, flexor, single, finger open, each	\$168.68	\$93.47	\$169.45			\$117.
CPT CODE		Tenotomy, open, extensor, foot or toe	\$133.00	\$88.29	\$121.13	\$210.25	\$86.47	\$211.
APG#		SIMPLE HAND & FOOT REPAIR EXCEPT TENOTOMY						
CPT CODE		Tendon sheath incision for trigger finger	\$164.04	\$92.31	\$151.44	\$154.24	\$137.48	\$105.
CPT CODE	20000	Hammertoe operation, one tow (e.g., interphalangeal fusion, filleting, phalangectomy)	\$199.26	\$125.72	\$158.51	\$222.54	\$217.40	\$163.
	73	COMPLEX HAND & FOOT REPAIR						
APG#		Arthrodesis, interphalangeal joint; with or w/o internal fix	\$209.31	\$154.53	\$156.35	\$233.09	\$182.79	\$185.
CPT CODE		Amputation, metatarsal, with toe, single	\$143.85	\$92.17	\$126.94	\$201.73	\$117.03	\$230.5
CPT CODE	74	REPAIR, EXCEPT ARTHROTOMY, OF BONE, JOINT, TENDON EXCEPT OF HAND & FOOT						
APG#		Repair of complete shoulder (rotator) cuff avulsion, chronic	\$184.33	\$159.00	\$120.96	\$412.84	\$414.26	\$352.
CPT CODE		Repair, tendon or muscle, flexor, forearm and/or wrist; prim		\$113.42	\$315.72	\$262.42	\$152.53	\$335.
CPT CODE		ARTHROTOMY EXCEPT OF HAND & FOOT				_		
APG#	75	Arthrotomy, knee, for excision of semilunar cartilage (meniscectomy); medial or lateral	\$150.30	\$104.24	\$109,48	\$75.87	\$65.91	\$42.7
CPT CODE	2/332	Arthrotomy, knee, for excision of semilunar cartilage (meniscectomy); medial and lateral	\$133.80	\$95.05	\$96,79	\$84.03	\$65.91	\$58.2
CPT CODE		Arthrotomy, knee, for excision of semilular cardiage (theniscectomy), media and lateral	*100.00	100100		12002		
APG#	76	ARTHROCENTESIS & LIGAMENT OR TENDON INJECTION	\$135.97	\$71.54	\$182.85	\$138.87	\$151.80	\$94.4
CPT CODE	20550	Injection, tendon sheath, ligament, trigger points or ganglion cyst	\$153.97	\$84.90	\$190.62	\$108.10	\$24.83	\$123.
CPT CODE		Arthrocentesis, aspiration and/or injection; intermediate joint, bursa or ganglion cyst	\$97.94	\$79.85	\$67.46	\$53,90	\$24.83	\$52.9
CPT CODE		Arthrocentesis, aspiration and/or injection; major joint or bursa	937.34	473.00	+07.40	100.00	12.1100	1000
APG#	77	SPEECH THERAPY	\$16.27	\$6.93	\$29.02	N.A.	N.A.	N.A
CPT CODE	92507	Speech, language or hearing therapy, with continuing medical supervision; group	\$8.43	\$8,43	\$5.76	N.A.	N.A.	N.A
CPT CODE		Speech, language or hearing therapy, with continuing medical supervision; individual	90.43	90,43	95.76	19.25.	14.6.	14.7
APG#	79	PULMONARY TEST & THERAPY EXCEPT SPIROMETRY	AF CO	\$4.87	\$5.04	N.A.	N.A.	N.A
CPT CODE		Intermittent positive pressure breathing (IPP8) treatment, a	\$5.60	\$2.16	\$2.51	N.A.	N.A.	N.A
CPT CODE		Noninvasive ear or pulse oximetry for oxygen saturation; sin	\$3.02	\$2.10	\$2.51	IV.A.	IV.A.	14.7
APG#	80	NEEDLE & CATHETER BIOPSY, ASPIRATION, LAVAGE & INTUBATION		101.05	470.00	404.00	404.63	N.A
CPT CODE		Thoracentesis, puncture or pleural cavity for aspiration, in	\$124.03	\$94.65	\$72.03	\$94.63	\$94.63 N.A.	N.A
CPT CODE	32405	Biopsy, lung or mediastinum, percutaneous needle	\$224.10	\$178.49	\$204.08	N.A.	IV.A.	IN.A
APG#	81	SIMPLE ENDOSCOPY OF THE UPPER AIRWAY	100.1-	104.00	404.00	4124.00	6111 50	\$86.
CPT CODE		Laryngoscopy, indirect (separate procedure); diagnostic	\$83.48	\$61.23	\$64.69	\$124.38	\$111.59	
CPT CODE	31510	Laryngoscopy, indirect (separate procedure) with biopsy	\$89.68	\$68.84	\$67.80	\$102.28	\$64.01	\$95.
APG#	82	COMPLEX ENDOSCOPY OF THE UPPER AIRWAY						1
CPT CODE	31535	Laryngoscopy, direct, operative with biopsy	\$124.36	\$83.58	\$85.10	\$130.51	\$105.67	\$105.
CPT CODE	31541	Laryngoscopy, direct, operative, with excision of tumor, w/o	\$129.51	\$111.12	\$85.07	\$158.05	\$116.27	\$152.
APG#	83	SIMPLE ENDOSCOPY OF THE LOWER AIRWAY				1 .		

MEAN, MEDIAN, & STANDARD DEVIATION FOR OVERHEAD COSTS - SURGICAL PROCEDURES

APG#

116 VASCULAR LIGATION

		MEAN, MEDIAN, & STANDARD DEVIATION FOR OVERHEAD COSTS - SI		Hospitals			A.S.C.s	
					Standard			Standard
SURGICAL		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
PROCEDURES	27010	Ligation, major artery (e.g., post-traumatic, rupture); extremity	\$156.46	\$111.85	\$87.39	N.A.	N.A.	N.A.
CPT CODE	37618	Interrupting, partial or complete, or femoral vein, by ligature, intravascular device	\$196.31	\$119.43	\$191,15	N.A.	N.A.	N.A.
	37650	Ligation and division and complete stripping of long or short saphenous veins	\$212,18	\$122.41	\$182.59	\$225.74	\$203.81	\$149.35
CPT CODE	3//20	CARDIOPULMONARY RESUSCITATION & INTUBATION						
APG#		Intubation, endotracheal, emergency procedure	\$49.66	\$35.01	\$57.83	\$30.56	\$30.56	\$21.38
CPT CODE		Cardiopulmonary resuscitation (e.g., in cardiac arrest)	\$51.76	\$37.13	\$45.03	N.A.	N.A.	N.A.
CPT CODE		CHEMOTHERAPY BY INFUSION		1				
APG#		Chemotherapy injection, intravenous, single premixed agent,	\$59.18	\$29.27	\$80,44	N.A.	N.A.	N.A.
CPT CODE	96501	Chemotherapy injection, intravenous, complex, using 1 or more	\$80.80	\$60,47	\$83.25	N.A.	N.A.	N.A.
CPT CODE			\$122.01	\$122.01	\$14.92	N.A.	N.A.	N.A.
CPT CODE	96510	Chemotherapy inject, iv, complex, using 1 or more agents req.  CHEMOTHERAPY EXCEPT BY INFUSION						
APG#			\$24.75	\$21.37	\$24.54	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy injection, intravenous, single premixed agent,	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Unlisted chemotherapy procedure						
APG#		TRANSFUSION & PHLEBOTOMY	\$72.28	\$73.72	\$48.42	\$73.38	\$73,38	N.A.
CPT CODE		Transfusion, blood or blood components	\$65.00	\$65.00	\$5.68	N.A.	N.A.	N.A.
CPT CODE		Push transfusion, blood, 2 years or under	400.00	700.00	10100	110.0		
APG#		DEEP LYMPH STRUCTURE & THYROID PROCEDURES	\$177.69	\$99.77	\$160.34	\$162.94	\$114.48	\$162.82
CPT CODE	38510	Biopsy or excision of lymph node(s); deep cervical node(s)	\$193.03	\$115.86		\$142.16		\$96.87
CPT CODE		Biopsy or excision of lymph node(s); deep axillary node(s)	9133.03	\$110.00	\$103.00	V172.10	7120.17	100101
APG#		ALIMENTARY TESTS AND SIMPLE TUBE PLACEMENT	\$52.43	\$52.43	\$58.01	N.A.	N.A.	N.A.
CPT CODE		Esophageal motility study	\$11.09	\$11.09	\$0.46	N.A.	N.A.	N.A.
CPT CODE		Esophagus, acid perfusion (Bernstein) test for esophagitis	\$11.05	V11.03	\$0.40	14.0.	14.70	141/34
APG#	158	ESOPHAGEAL DILATION WITHOUT ENDOSCOPY	\$80.70	\$70.16	\$68.68	\$101.76	\$96.67	\$92.56
CPT CODE		Dilation of esophagus, by unguided sound or bougie, single o	\$78.06	\$65.45	\$72.78	\$97.22	\$79.34	\$96.87
CPT CODE	43451	Dilation of esophagus, by unguided sound or bougie, single o	978.00	900.40	7/2./0	V37.22	V/3.04	400.01
APG#		PERCUTANEOUS & OTHER SIMPLE GASTROINTESTINAL BIOPSY	\$143.59	\$107.79	\$168.18	\$45.28	\$45.28	\$7.07
CPT CODE		Biopsy of liver, percutaneous needle	\$76.34	\$53.05	\$68.77	\$40.28	\$40.28	N.A.
CPT CODE	49180	Biopsy, abdominal or retroperitoneal mass, percutaneous needle	\$32.45	\$32.45	\$19.25	N.A.	N.A.	N.A.
CPT CODE		Esophageal intubation and collection of washings for cytology, including preparation of specimens (	₹32.45	932.45	915.25	IV.M.	14.74.	IV.A.
APG#		ANOSCOPY WITH BIOPSY & DIAGNOSTIC PROCTOSIGMOIDOSCOPY	\$59.02	\$53.84	\$42.43	\$79.33	\$43.27	\$96.07
CPT CODE		Proctosigmoidoscopy diagnostic (separate procedure)	\$87.31	\$74.94	\$66.67	\$116.53	\$70.16	\$113.95
CPT CODE		Sigmoidoscopy, flexible fiberoptic diagnostic			\$69.26	\$65.46	\$28.79	\$73.88
CPT CODE		Anoscopy for removal of polyp	\$59.88	\$40.91	\$69.20	\$65.46	\$20.79	9/3.00
APG#		PROCTOSIGMOIDOSCOPY WITH EXCISION OR BIOPSY	101.00	100.00	\$70.36	\$88.67	\$59.97	\$80.85
CPT CODE	45331	Sigmoidoscopy, flexible fiberoptic for biopsy and/or collect	\$91.69	\$82.33				\$120.15
CPT CODE	45333	Sigmoidoscopy, flexible fiberoptic for removal of polypoid I	\$106.37	\$91.96	\$79.38	\$104.83	\$52.03	\$120.13
APG#		DIAGNOSTIC UPPER GASTROINTESTINAL ENDOSCOPY			10100	100 10	\$49.78	\$80,19
CPT CODE	43235	Upper GI endoscopy including esophagus, stomach and either d	\$89.07	\$75.52	\$64.05	\$92.42	\$74.19	\$80.19
CPT CODE	43239	Upper GI endoscopy incl. esophagus etc. for biopsy and/or collection of specimen by brushing or w	\$107.23	\$97.31	\$77.72	\$115.16	\$74.19	\$89.21
APG#		THERAPEUTIC UPPER GASTROINTESTINAL ENDOSCOPY				1	13110	1
CPT CODE	43245	Upper GI endoscopy including esophagus etc. for dilation of	\$74.89	\$62.50	\$77.68	\$108.38	\$74.19	\$104.47
CPT CODE	43246	Upper GI endoscopy including esophagus etc. for directed placement of percutaneous gastrostomy	\$76.68	\$62.21	\$74.05	\$78.94	\$86.47	\$53.24
APG#		DIAGNOSTIC LOWER GASTROINTESTINAL ENDOSCOPY				1	470.40	1 4400 40
CPT CODE		Colonoscopy, fiberoptic, beyond splenic flexure; diagnostic	\$132.76		\$111.22		\$70.16	\$122.49
CPT CODE	45380	Colonoscopy, fiberoptic, beyond splenic flexure; for biopsy	\$146.15	\$117.64	\$119.51	\$151.67	\$110.42	\$124.73
APG#	165	THERAPEUTIC LOWER GASTROINTESTINAL ENDOSCOPY						
CPT CODE	45383	Colonoscopy, fiberoptic, beyond splenic flexure; for ablation of tumor or mucosal lesion	\$167.74		\$150.90			
CPT CODE	45385	Colonoscopy, fiberoptic, beyond splenic flexure; for removal of polypoid lesion(s)	\$140.60	\$119.11	\$111.39	\$139.74	\$70.09	\$124.59

		MEAN, MEDIAN, & STANDARD DEVIATION FOR OVERHEAD COSTS - SU		Hospitals			A.S.C.s	
				riuspitais	Standard		71101010	Standard
SURGICAL		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviatio
PROCEDURES			Wiedii	Micalan	Bettietieti	- 1110011		
APG#	166	ERCP & OTHER MISC. GASTROINTESTINAL ENDOSCOPY PROCEDURES	\$161.49	\$119.10	\$158.15	N.A.	N.A.	N.A.
CPT CODE	43260	Endoscopic retrograde cholangiopan-creatography w/ or w/o bi	\$123.11	\$70.17	\$125.53	\$52.49	\$32.00	\$43.81
CPT CODE		Small intestinal endoscopy beyond second portion of duodenum	\$123.11	\$70.17	\$1Z0.03	VJZ.43	V32.00	7-10.01
APG#		TONSIL & ADENOID PROCEDURES	\$202.78	A121 E1	\$148.35	\$184.93	6119 10	\$150.3
CPT CODE		Tonsillectomy and adenoidectomy, age 12 or over		\$167.61		\$169.31		\$147.4
CPT CODE	42826	Tonsillectomy, primary or secondary age 12 or over	\$202.50	\$167.61	₹135.80	\$109.31	\$130.42	7147.4
APG#	168	HERNIA & HYDROCELE PROCEDURES		1450.04	4101.00	A000 C4	A100 OF	\$164.46
CPT CODE		Repair inguinal hernia, age 5 or over	\$177.03	\$158.91	\$121.63			
CPT CODE	49520	Repair inguinal hernia, any age recurrent	\$180.31	\$121.08	\$125.53	\$197.30	\$149.10	\$154.0
APG#	169	SIMPLE HEMORRHOID PROCEDURES						1100 5
CPT CODE	46230	Excision of external hemorrhoid tags and/or multiple papilla	\$110.44	\$77.90	\$119.80	\$173.96		\$139.5
CPT CODE	46934	Description of Hemorrhoids, any method, internal	\$126.75	\$77.90	\$120.80	\$182.71	\$161.81	\$143.6
APG#	170	SIMPLE ANAL & RECTAL PROCEDURES EXCEPT HEMORRHOID PROCEDURES						
CPT CODE		Removal of fecal impaction or foreign body (separate procedu	\$127.19	\$88.29	\$93.72	\$71.47	\$71.47	\$55.82
CPT CODE		Fissurectomy, with or without sphincterotomy	\$106.96	\$88.29	\$84.09	\$161.76	\$141.64	\$108.7
APG#		COMPLEX ANAL & RECTAL PROCEDURES						
CPT CODE		Excision of Rectal tumor, transanal approach	\$207.01	\$125.92	\$249.25	\$168.81	\$87.89	\$207.4
CPT CODE		Hemorrhoidectomy internal and external, simple	\$129.80	\$95.91	\$104.49	\$209.77	\$188.19	\$142.9
	40200	PERITONEAL PROCEDURES & CHANGE OF INTRA-ASDOMINAL TUSE						
APG#		Change of Gastrostomy Tube	\$50,42	\$26.42	\$48,13	\$63.52	\$70.16	\$36.92
CPT CODE			\$76.87	\$54.11	\$71.73	N.A.	N.A.	N.A.
CPT CODE		Peritoneocentesis, abdominal paracentesis, or peritoneal lav	470107					
APG#		MISC. DIGESTIVE PROCEDURES	\$100.43	\$114.58	\$81.34	\$109.01	\$70.16	\$109.9
CPT CODE	43750	Percutaneous placement of gastrostomy tube	\$129.58	\$89.20	\$108.27	N.A.	N.A.	N.A.
CPT CODE		Insertion of intraperitoneal cannula or catheter for drainage of dialysis; temporary	V125.50	V00.20	VIOUIL!	1100	141111	
APG#		SIMPLE URINARY STUDIES & PROCEDURES	\$84.31	\$59.18	\$82.76	\$188.19	\$188.19	N.A.
CPT CODE		Bladder instillation of anticarcinogenic agent	\$94.13	\$82.44	\$67.96	N.A.	N.A.	N.A.
CPT CODE	51725	Simple cystometrogram (CMG) (e.g., spinal manometer)		\$96.80	\$61.03	N.A.	N.A.	N.A.
CPT CODE	51736	Simple uroflowmetry (UFR) (e.g., stop-watch flow rate, mechanical uroflowmeter)	\$96.43	\$96.80	\$61.03	IV.A.	IV.A.	14.75.
APG#	184	RENAL EXTRACORPOREAL SHOCK WAVE LITHOTRIPSY			110107	\$643.49	\$643.49	\$253.8
CPT CODE		Lithotripsy, extracorporeal shock wave	\$122.08	\$105.20	\$104.07	\$643.49	\$643.49	\$255.0
APG#	185	URINARY CATHETERIZATION & DILATATION						
CPT CODE	51010	Aspiration of bladder; by trocar or intracatheter with insertion of suprapubic catheter	\$70.52	\$69.01	\$34.31	\$220.64	\$220.64	N.A.
CPT CODE	53660	Dilation of female urethra including suppository and/or instillation; initial	\$101.98	\$62.50	\$102.67	\$90.24	\$85.43	\$30.93
CPT CODE		Catheterization, urethra simple	\$65.06	\$38.44	\$67.36	\$21.03	\$21.03	\$11.7
APG#		HEMODIALYSIS						
CPT COLE	90935	Hemodialysis procedure with single physician evaluation	\$39.52	\$9.86	\$58.32	N.A.	N.A.	N.A.
CPT CODE	90937	Hemodialysis procedure requiring repeated evaluation(s) with or without substantial revision of dialy	\$106.71	\$106.71	N.A.	N.A.	N.A.	N.A.
APG#	100	SIMPLE CYSTOURETHROSCOPY						
CPT CODE		Cystourethroscopy (separate procedure)	\$123.77	\$82.44	\$107.24	\$136.91	\$134.69	\$67.7
	52000	Cystourethroscopy, with calibration and/or dilation or urethral stricture or stenosis, with(out) meato	\$123.83	\$95.09	\$89.04	\$173.45	\$177.31	\$65.0
CPT CODE	189	COMPLEX CYSTOURETHROSCOPY & LITHOLAPAXY						
APG#	189	Cystourethroscopy, w/ fulguration or treatment of minor lesion(s) with(out) biopsy	\$131.81	\$94.04	\$94.06	\$168.00	\$168.73	\$99.4
CPT CODE	52224	Cystourethroscopy, w/fulguration and/or resection of; small	\$144.26		\$103.54	\$170.27	\$147.78	\$102.1
CPT CODE	52234	PERCUTANEOUS RENAL ENDOSCOPY, CATHETERIZATION & URETERAL END						
APG#	190	PERCUTANEOUS RENAL ENDUSCOFT, CATHETERIZATION & ORETERAL END	\$83,46	\$55.44	\$64.68	N.A.	N.A.	N.A.
CPT CODE	50392	Introduction of intracatheter or catheter into renal pelvis		\$105.67	\$51.24	N.A.	N.A.	N.A.
CPT CODE	50393	Introduction of ureteral catheter or stent into ureter through renal pelvis for drainage and/or injectio	6114.02	\$99.84	\$57.76		\$139.52	N.A.
CPT CODE		Ureteral endoscopy through established ureterostomy, with ureteral catheterization, with(out) dilati	9114.93	933.84	407.76	4109.02	V105.02	14.M.
APG#	191	CYSTOTOMY						1

		MEAN, MEDIAN, & STANDARD DEVIATION FOR OVERHEAD COSTS - S		Hospitals			A.S.C.s	
SURGICAL				Tioopitano	Standard			Standar
		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
PROCEDURES	54000	Cystotomy or cystostomy; with fulguration and/or insertion o	\$102.70	\$57.50	\$91.55	\$107.68	\$107.68	N.A.
CPT CODE		Cystostomy; cystotomy with drainage	\$81.32	\$70.15	\$56.81	\$117.08		\$31.74
CPT CODE	51040	Cystostomy with drainage  Cystostomy winsertion of ureteral catheter or stent (separate procedure)	\$109.01	\$107.68	\$73.13	\$160.92		\$75.29
CPT CODE		SIMPLE URETHRAL PROCEDURES	1100101					
APG#			\$130.85	\$91.12	\$130,78	\$205.39	\$192.56	\$109.8
CPT CODE		Biopsy of urethra	\$127.31	\$80.68	\$139.48	\$201.33		\$111.8
CPT CODE		Excision or fulguration; urethral, caruncle	¥127.01	400100	************			
APG#		COMPLEX URETHRAL PROCEDURES	\$133.25	\$93.91	\$149.24	\$137.38	\$137.38	\$48.9
CPT CODE	53220	Excision or fulguration of carcinoma of urethra	\$115.26	\$89.96	\$80.50	\$155.75	\$155.75	N.A.
CPT CODE		Excision of urethral diverticulum (separate procedure); male	¥110.20	VU3.30	V00.50	V100.70	¥100170	
APG#	209	TESTICULAR EPIDIDYMAL PROCEDURES	\$155.70	\$88.43	\$131.89	\$168.36	\$141.64	\$124.7
CPT CODE		Orchiectomy, simple, w/ or w/o testicular prosthesis, scrota	\$173.81	\$109.92	\$169.51		\$130.37	\$130.7
CPT CODE		Orchiectomy, simple w/ or w/o testicular prosthesis, scrotal	V1/3.61	V105.32	4103.01	+100.40	+130.37	2100.7
APG#	210	INSERTION OF PENILE PROSTHESIS	\$185.10	\$141.93	\$131.87	\$262.40	\$282.20	\$39.43
CPT CODE	54400	Insertion of penile prosthesis; non-inflatable	\$192.36	\$159.58	\$135.23	\$320.65	\$285.11	\$84.31
CPT CODE		Insertion of inflatable (multi-component) penile prosthesis, including placement of pump, cylinders,	9192.36	9109.08	¥130.23	V320.05	VZ00.11	704.3
APG#	211	COMPLEX PENILE PROCEDURES	\$141.73	\$122.80	\$103.47	N.A.	N.A.	N.A.
CPT CODE	54402	Removal or replacement of non-inflatable (semi-rigid) or inflatable (self-contained) penile prosthesis				\$180.19	\$188.19	\$57.50
CPT CODE	54407	Removal, repair or replacement of inflatable penile prosthesis, including pump and/or reservoir and/	\$129.09	\$95.19	\$106.70	\$180.19	\$188.19	\$57.50
APG#	212	SIMPLE PENILE PROCEDURES		117010	1007.70	4400.00	400.04	\$105.3
CPT CODE		Circumcision, clamp procedure except newborn	\$211.63	\$172.13		\$106.30	\$69.04	
CPT CODE	54161	Circumcision, surgical excision other than clamp	\$179.73	\$94.63	\$177.05	\$186.09	\$169.32	\$132.4
APG#	213	PROSTATE NEEDLE & PUNCH 8IOPSY						
CPT CODE	55700	Biopsy, prostate needle or punch single or multiple, any app	\$115.95	\$87.22	\$95.84	\$131.16		\$91.22
CPT CODE	55705	Biopsy, prostate incisional, any approach	\$100.04	\$80.07	\$91.89	\$108.89	\$104.88	\$87.92
APG#	214	TRANSURETHRAL RESECTION OF PROSTATE & OTHER PROSTATE PROCEDURE						
CPT CODE		Transurethral resection of bladder neck (separate procedure)	\$147.70	\$120.69	\$103.49	\$222.29	\$204.42	\$123.2
CPT CODE	52601	Transurethral resection or prostate, including control of postoperative bleeding	\$214.08	\$95.90	\$233.91	\$330.96	\$330.96	N.A.
APG#	237	PROCEDURES FOR PREGNANCY & NEONATAL CARE						
CPT CODE	59801	Treatment of spontaneous abortion, first trimester, complete	\$126.76	\$82.27	\$116.41	\$101.76	\$84.36	\$84.3
CPT CODE		Treatment of missed abortion, any trimester, completed medic	\$133.66	\$89.67	\$109.88	\$127.41	\$107.08	\$88.6
APG#	238	THERAPEUTIC ABORTION						
CPT CODE		Legal (therapeutic ) abortion, by dilation and curettage, an	\$124.93	\$85.23	\$105.58		\$84.36	\$116.5
CPT CODE		Legal (therapeutic) abortion, by dilation and evacuation	\$181.09	\$144.62	\$139.89	\$108.66	\$77.26	\$95.7
APG#		FEMALE GENITAL ENDOSCOPY						
CPT CODE		Laparoscopy for visualization of pelvic viscera	\$229.58	\$119.93	\$193.35	\$229.52	\$205.36	\$165.3
CPT COLE		Laparoscopy for visualization of pelvic viscera, with lysis of adhesions	\$215.79	\$122.82	\$199.58	\$202.15	\$162.91	\$124.5
APG#		COLPOSCOPY						
CPT CODE		Colposcopy (vaginoscopy); (separate procedure)	\$150,13	\$111.68	\$152.83	\$182.39	\$119.16	\$150.0
CPT CODE		Colposcopy (vaginoscopy); with biopsies, or biopsy of the cervix	\$142.17	\$96.57	\$110.70	\$150.54	\$94.63	\$149.
APG#		MISC. FEMALE REPRODUCTIVE PROCEDURES		-				
CPT CODE		8iopsy of vulva (separate procedure)	\$131.39	\$76.89	\$125.83	\$180.58	\$155.75	\$157.2
CPT CODE		Biopsy of cervix, circumferential (cone) with or without dilation	\$127.70	\$76.32		\$171.52		\$135.2
APG#		DILATION & CURETTAGE						
CPT CODE		Dilation and curettage of cervical stump	\$151.67	\$88.29	\$116.73	\$63.49	\$53.84	\$42.6
		Dilation and curettage of cervical stump  Dilation and curettage, diagnostic and/or therapeutic (nonobstetrical)	\$150.80	\$96.50	\$112.07	\$156.10		\$110.1
CPT CODE			1	,,,,,,,				1
APG#		FEMALE GENITAL EXCISION & REPAIR  Vulvectomy; partial, unilateral or bilateral (less than 80%)	\$137.25	\$88.29	\$160.86	\$156.36	\$130.40	\$113.8
CPT CODE		Excision of vaginal cyst or tumor	\$127.51			\$145.80		\$108.0

		MEAN, MEDIAN, & STANDARD DEVIATION FOR OVERHEAD COSTS - SU	JAGICAL	THOCEL	OILO		A.S.C.s		
				Hospitals					
SURGICAL					Standard			Standard	
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviatio	
APG#	261	ELECTROENCEPHALOGRAM							
CPT CODE	95819	Electroencephalogram (EEG) including recording awake, drowsy	\$82.80	\$31.94	\$141.64	N.A.	N.A.	N.A.	
CPT CODE	95828	Polysomnography (recording, analysis and interpretation of t	\$216.23	\$181.14	\$223.51	N.A.	N.A.	N.A.	
APG#		NERVE & MUSCLE TESTS							
CPT CODE	95900	Nerve conduction, velocity and/or latency study; motor, each nerve	\$16.19	\$10.48	\$18.84	N.A.	N.A.	N.A.	
CPT CODE	95904	Nerve conduction, velocity and/or latency study; sensory, each nerve	\$17.12	\$15.23	\$16.45	N.A.	N.A.	N.A.	
APG#	264	INJECTION OF SUBSTANCE INTO SPINAL CORD							
CPT CODE	62278	Injection of anesthetic substance (including narcotics), diagnostic or therapeutic epidural, lumbar, c	\$65.20	\$45.68	\$45.21		\$119.23	\$56.08	
CPT CODE	62270	Injection of substance other than anesthetic, contrast, or n	\$89.60	\$96.80	\$29.66	\$129.65	\$105.85	\$87.46	
	02203	NERVE INJECTION & STIMULATION							
APG#	200	Injection, anesthetic agent; stellate ganglion (cervical sympathetic)	\$92.33	\$91.71	\$58.57	\$113.12		\$57.65	
CPT CODE	04510	Injection, anesthetic agent; fumbar or thoracic (paravertebral, sympathetic)	\$76.44	\$86.04	\$50.77	\$177.51	\$177.98	\$99.24	
CPT CODE	64520	REVISION & REMOVAL OF NEUROLOGICAL DEVICE							
APG#	20/	Revision or removal of spinal neurostimulator electrodes	\$104.61	\$111.12	\$16.32	\$70.16	\$70.16	N.A.	
CPT CODE	63660	Revision or removal of spinal neurostimulator receiver	\$90.66	\$98.03	\$26.18	\$119.10	\$119.10	N.A.	
CPT CODE		CARPAL TUNNEL RELEASE			1				
APG#	269	Neuroplasty and/or transposition; median nerve at carpal tun	\$183.91	\$117.47	\$177.73	\$214.71	\$191.75	\$150.4	
CPT CODE	270	NERVE REPAIR & DESTRUCTION			-				
APG#	270	Neuroplasty and/or transposition ulnar nerve at elbow	\$240.97	\$136.54	\$321.03	\$334.97	\$380.01	\$223.5	
CPT CODE	64/18	Neuroplasty and/or transposition uniar nerve at wrist	\$183.46	\$136.54	\$148.07	\$301.90	\$287.34	\$148.8	
CPT CODE		COMPLEX NERVE REPAIR							
APG#	271		\$171.86	\$149.36	\$96.28	\$275.55	\$231.57	\$279.0	
CPT CODE	64831	Suture of digital nerve, hand or foot; one nerve Suture of one nerve, hand or foot; common sensory nerve	\$153.87	\$120.59	\$78.67	\$193.89	\$161.81	\$156.9	
CPT CODE									
APG#		SPINAL TAP	\$56.65	\$45.44	\$28.89	N.A.	N.A.	N.A.	
CPT CODE	62270	Spinal puncture, lumbar, diagnostic	\$46.80	\$45.89	\$3.08	N.A.	N.A.	N.A.	
CPT CODE		Spinal puncture, therapeutic, for drainage of spinal fluid (							
APG#	289	SIMPLE LASER EYE PROCEDURES	\$142.43	\$113.70	\$91.16	\$37.54	\$37.53	\$22.10	
CPT CODE	65855	Trabeculoplasty by laser surgery, one or more sessions	\$157.39	\$125.60		\$100.04	\$90.59	\$94.40	
CPT CODE		Discission of secondary membraneous cataract, and/or anterio	7107.00						
APG#	290	COMPLEX LASER EYE PROCEDURES  Repair of retinal detachment, one or more sessions, photocoagulation, with(out) drainage of subreti	\$223.26	\$177.43	\$143.88	\$717.81	\$591.77	\$478.5	
CPT CODE	67105	Repair of retinal detachment, one or more sessions, photocoagulation, without or amage or society	\$121.04	\$123.82	\$47.59	\$71.01	\$59.64	\$40.3	
CPT CODE	67228	Destruction of extensive or progressive retinopathy (e.g., diabetic retinopathy) one or more session	V121.04	TIZOIOZ	111100	11			
APG#	291	CATARACT PROCEDURES	\$198.93	\$135,41	\$186.24	\$256.47	\$228.53	\$190.8	
CPT CODE	66850	Removal of lens material; phacofragmentation technique	\$124.81	\$128.44			\$200.74		
CPT CODE	66940	Extraction of lens with or without indectomy; extracapsular	\$234.50			\$247.94			
CPT CODE	66983	Intracapsular cataract extraction with insertion of intraocular lens prosthesis	\$234.50	\$163.92		\$267.67	\$253.38		
CPT CODE	66984	Extracapsular cataract removal with insertion of intraocular	\$153.34	\$116.18		\$225.40	\$252.23		
CPT CODE	66985	Insertion of intraocular lens subsequent to cataract removal	\$153.34	\$110.10	9150.14	\$220.40	VZUZ.ZU	V1-1010	
APG#	292	SIMPLE ANTERIOR SEGMENT EYE PROCEDURES FOR GLAUCOMA	\$142.33	\$111.12	\$156,34	\$96.64	\$105.00	\$55.6	
CPT CODE		Iridotomy by stab Incision (separate procedure); except transfixion		\$79.78	\$44.31		\$248.77		
CPT CODE	66720	Cyclocryotherapy initial	\$79.78	9/9./8	744.31	7237,44	V2-40.77	7.73.	
APG#	293	COMPLEX ANTERIOR SEGMENT EYE PROCEDURES FOR GLAUCOMA	405.74	ACO 08	\$43.20	10262 22	\$482.00	\$241.3	
CPT CODE	66150	Fistulization of sclera for glaucoma; trephination with iridectomy	\$65.74	\$60.98			\$392.55		
CPT CODE	66170	Fistulization of sclera for glaucoma trabeculectomy ab externo	\$205.04	\$247.59	\$130.81	9384.70	9332.55	7202.0	
APG#	294	SIMPLE ANTERIOR SEGMENT EYE PROCEDURES EXCEPT FOR GLAUCOMA	100.10	100.00	AC 00	A152.17	\$163.95	\$105.9	
CPT CODE	65450	Destruction of lesion of cornea by cryotherapy, photocoagulation or thermocauterization	\$60.42	\$60.98	\$5.33		\$163.95		
CPT CODE	66820	Discussion or secondary membraneous cataract and/or anterior	\$142.66	\$111.12	\$125.07	\$155.09	9117.64	V 101.5	
APG#	295	MODERATE ANTERIOR SEGMENT EYE PROCEDURES	1		1				

SURGICAL			SURGICAL PROCEDURES  Hospitals A.S.C.s					
				Tioopitoio	Standard			Standar
POCEDIIDEC			Mean	Median	Deviation	Mean	Median	Deviatio
HOCEDONES		APG & CPT DESCRIPTION	\$78.69	\$79.78	\$49.96	\$142.44	\$128.12	\$107.06
CPT CODE	66625	Iridectomy, w/corneoscleral or corneal section; peripheral of glaucoma (separate procedure)	\$95.51	\$66.27	\$84.29	\$155.48	\$155.48	N.A.
CPT CODE	66830	Removal of secondary membraneous cataract, with corneoscleral section, with(out) iridectomy	V33.31	400127				
APG#	296	COMPLEX ANTERIOR SEGMENT EYE PROCEDURES EXCEPT FOR GLAUCOMA	\$86.05	\$86.05	\$35.45	\$339.01	\$296.98	\$248.9
CPT CODE	65750	Keratoplasty, penetrating, includes autografts and fresh or preserved grafts		\$138.89	\$223.15		\$141.37	\$300.8
CPT CODE	67010	Removal of vitreous, anterior approach; subtotal removal with mechanical vitrectomy	7200.20	V100.00	1220110			
APG#	297	SIMPLE POSTERIOR SEGMENT EYE PROCEDURES	\$191.01	\$133.95	\$178.09	N.A.	N.A.	N.A.
CPT CODE	67208	Destruction of localized lesion of retina (e.g., maculopathy, choroidopathy, small tumors), one or m	\$97.46	\$97.46	\$51.60		\$186.51	\$129.9
CPT CODE	67227	Destruction of extensive or progressive retinopathy (e.g., diabetic retinopathy, one or more session	\$57.40	337.40	V31.00	V100101		
APG#	298	COMPLEX POSTERIOR SEGMENT EYE PROCEDURES	\$116.25	\$90.06	\$87,51	\$334.05	\$228.78	\$345.6
CPT CODE	-	and the standard of the standa		\$133.95	\$101.30	\$746.73		\$443.3
CPT CODE	67101	Repair of retinal detachment, one or more sessions, cryotherapy or diathermy, with(out) drainage of	\$180.64	\$133.95	\$101.30	\$740.75	<b>4001177</b>	
APG#	299	STRABISMUS & MUSCLE EYE PROCEDURES		\$149.79	\$154.24	\$243.78	\$260.30	\$158.3
CPT CODE	67311	Strabismus surgery on patient not previously operated on, an	\$176.51		\$208.09		\$308.25	\$215.5
CPT CODE	67312	Strabismus surgery on patient not previously operated on; an	\$180.39	\$88.29	\$208.09	\$305.77	\$300.23	VZ 10.0
APG#	300	SIMPLE REPAIR & PLASTIC PROCEDURES OF EYE				\$176.44	A140.02	\$158.4
CPT CODE	67840	Excision of lesion of eye lid without closure or with simple	\$148.65	\$84.61	\$223.03	\$247.33		\$142.8
CPT CODE		Repair of entropion suture	\$192.97	\$91.46	\$289.45	\$247.33	\$214.11	9142.0
APG#	301	COMPLEX REPAIR & PLASTIC PROCEDURES OF EYE					\$220.01	\$243.0
CPT CODE	6790/	Repair of blepharoptosis (tarso)-levator resection or advancement, external approach	\$311.00	\$89.80	\$324.62	\$269.11		\$357.7
CPT CODE	69720	Dacryocystorhinostomy (fistulization of lacrimal sac to nasal cavity)	\$429.83	\$311.71	\$398.69	\$477.68	\$534.92	\$357.7
APG#	313	OTORHINOLARYNGOLOGIC FUNCTION TESTS						
	02545	Oscillating tracking test, with recording	\$0.34	\$0.34	N.A.	N.A.	N.A.	N.A.
CPT CODE	92545	Brainstem evoked response recording (evoked response (EEG) audiometry)	\$139.84	\$31.73	\$214.50	N.A.	N.A.	N.A.
CPT CODE	314	MAJOR EXTERNAL EAR PROCEDURES						
APG#		Excision exostosis (es), external auditory canal	\$86.59	\$89.71	\$47.37	\$184.51		\$203.3
CPT CODE	69140	Reconstruction of external auditory canal (meatoplasty), separate procedure	\$158.74	\$96.63	\$133.95	\$221.30	\$221.30	\$109.9
CPT CODE		TYMPANOSTOMY & OTHER SIMPLE MIDDLE EAR PROCEDURES						
APG#	315	Myringotomy including aspiration and/or eustachian tube inflation requiring general anesthesia	\$128.43	\$76.39	\$128.24	\$101.50	\$78.31	\$83.4
CPT CODE	69420	Nyringotomy including aspiration and costs and the state of the state	\$65.86	\$42.97	\$60.33	\$98.16	\$74.19	\$78.0
CPT CODE		TYMPANOPLASTY & OTHER COMPLEX MIDDLE EAR PROCEDURES						
APG#	316	TYMPANOPLASTY & OTHER COMPLEX MIDDLE EAR PROCESSING.  Tympanoplasty w/o mastoidectomy (including canalplasty, atticotomy and/or middle ear surgery), i	\$245.75	\$160.15	\$278.99	\$211.90		\$190.2
CPT CODE	6963	Tympanoplasty w/o mastologictomy (including carappasty, according to the property of the prope	\$350.00	\$296.29	\$260.50	\$200.94	\$145.99	\$172.0
CPT CODE								
APG#	318	SIMPLE AUDIOMETRY	\$24.15	\$11.60	\$31.77	N.A.	N.A.	N.A
CPT CODE		7 Basic comprehensive audiometry	\$1.72	\$2.08	\$1.48	N.A.	N.A.	N.A
CPT CODE		7 Tympanometry		1				
APG#	319	REMOVAL OF IMPACTED CERUMEN	\$101.72	\$45.44	\$151.44	\$102.70	\$74.55	\$80.2
CPT CODE	6921	Removal impacted cerumen (separate procedure), one or both ears	1.31172	-				
		AGGREGATE MEAN FOR ALL SURGICAL PROCEDURES	\$134,91	\$96.93	\$117.06	\$173.14	\$149.24	\$133.

		MEAN, MEDIAN, & STANDARD DEVIATION FOR OVERHEAD COSTS - SU	Hospitals			A.S.C.s			
					Standard			Standard	
SURGICAL		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation	
PROCEDURES	404	BLOOD & BLOOD PRODUCT EXCHANGE							
APG#		Exchange transfusion, blood, other than newborn	\$60.98	\$60.98	N.A.	N.A.	N.A.	N.A.	
CPT CODE	35455	Therapeutic apheresis (plasma and/or cell exchange)	\$488.95	\$293.78	\$568.00	N.A.	N.A.	N.A.	
CPT CODE	36520	ALLERGY TESTS AND IMMUNOTHERAPY							
APG#	136	Percutaneous tests (scratch, puncture, prick) with allergenic extracts, immediate type reaction, spe	\$200.00	\$200.00	N.A.	N.A.	N.A.	N.A.	
CPT CODE									
APG#	187	PERITONEAL DIALYSIS Dialysis procedure other than hemodialysis (eg, peritoneal, hemofiltration), with single physician ev	\$169.23	\$169.23	N.A.	N.A.	N.A.	N.A.	
CPT CODE	90945	Dialysis procedure other than hemodialysis (eg, peritoneal, hemofiltration) requiring repeated evalua	\$46.50	\$46.50	N.A.	N.A.	N.A.	N.A.	
CPT CODE	90947	Dialysis procedure other than nemodialysis (eg., peritorieal, riemonitation) requiring repetited evalua-	1 10100						
APG#		PROCEDURES FOR PREGNANCY & NEONATAL CARE	\$188.53	\$188.53	N.A.	N.A.	N.A.	N.A.	
CPT CODE	59025	Fetal non-stress test	\$35.01	\$35.01	N.A.	N.A.	N.A.	N.A.	
CPT CODE	59050	Initiation and/or supervision of internal fetal monitoring during labor by consultant with report (sepa	\$30.01	730.01	111.61	14070			
APG#	262	ELECTROCONVULSIVE THERAPY	\$15.87	\$15.87	N.A.	N.A.	N.A.	N.A.	
CPT CODE	90870	Electroconvulsive therapy (includes necessary monitoring); single seizure		\$15.87	N.A.	N.A.	N.A.	N.A.	
CPT CODE		Electroconvulsive therapy (includes necessary monitoring); multiple seizures, per day	\$15.87	\$15.87	IV.A.	IV.A.	IV.M.	18.0.	
APG#		SUBDURAL & SUBARACHNOID TAP		\$48.45	N.A.	N.A.	N.A.	N.A.	
CPT CODE	62225	Replacement or irrigation, ventricular catheter	\$48.45			N.A.	N.A.	N.A.	
CPT CODE	63744	Replacement, irrigation or revision of lumbosubarachnoid shunt	\$245.42	\$245.42	\$225.40	N.A.	N.A.	IV.A.	
APG#		NEUROSTIMULATOR AND VENTRICULAR SHUNT IMPLANTATION				N.A.	N.A.	N.A.	
CPT CODE	63650	Percutaneous implantation of neurostimulator electrodes; epidural	\$93.52	\$93.52	\$10.59		\$43.04	N.A.	
CPT CODE	64560	Percutaneous implantation of neurostimulator electrodes; autonomic nerve	\$86.04	\$86.04	N.A.	\$43.04	\$43.04	IV.A.	
APG#	287	MINOR OPTHAL MOLOGICAL TESTS & PROCEDURES					N.A.	N.A.	
CPT CODE	92235	Ophthalmoscopy, with medical diagnostic evaluation; with fluorescein angiography (includes multifr	\$11.97	\$11.97	N.A.	N.A.	N.A.	N.A.	
APG#	317	INNER EAR PROCEDURES						AL A	
CPT CODE	69806	Endolymphatic sac operation; with shunt	\$255.29	\$156.78	\$234.56	N.A.	N.A.	N.A.	
CPT CODE		Revision fenestration operation	\$86.04	\$86.04	N.A.	\$293.60	\$293.60	N.A.	

A.S.C.s

Median

69.04

169.32

118 1

104.88

204.42

Standard

Deviation

105.36

132.42

91 22

87.92

Count

6

16

6

6

10.48

15.23

45.68

96.8

18 84

16.45

45.21

29.66

Mean

211.63

179.73

115 95

100.04

147.7

54152

54161

55705

214

95900

95904

264 62278

62289

265

16.19

17.12

65.2

89.6

Median

94.63

87 22

80.07

MEAN, MEDIAN, STANDARD DEVIATION & COUNT FOR OVERHEAD COSTS - SURGICAL PROCEDURES Hospitals

Count

17

24

12

16

Mean

106.3

186.09

108.89

N.A.

N.A.

124 51

129.65

8

7

3

N.A.

N.A.

119.23

105.85

N.A.

N.A.

56.08

87.46

Standard

Deviation

207.79

177.05

95.84

91.89

SURGICAL

CPT CODE

CPT CODE

CPT CODE

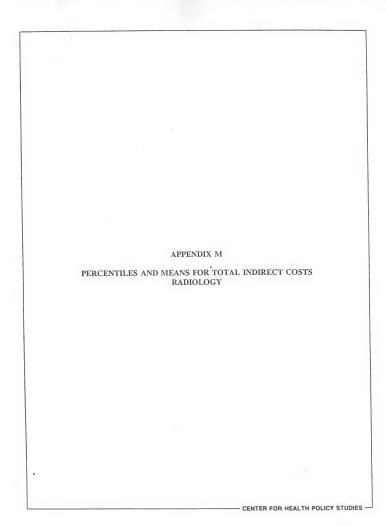
APG# CPT CODE

APG#

APG#

APG#

CPT CODE



		MEAN, MEDIAN, & STANDARD DEVIATION FOR TOTAL INDIRECT COSTS - RA	ADIOLOG	T PRUCE	DUKES			
				Hospitals		Phy	sicians' Of	
RADIOLOGY					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	341	SIMPLE DIAGNOSTIC NUCLEAR MEDICINE						
CPT		Bone imaging; whole body	\$121.01	\$91.03	\$84.83	\$157.86	\$66.68	\$186.76
APG#		COMPLEX DIAGNOSTIC NUCLEAR MEDICINE						
CPT	70461	Myocardial perfusion imaging; exercise and redistribution, qualitative or quantitative	\$240.76	\$182.04	\$177.42	\$163.87	\$165.64	\$117.39
APG#	242	THERAPEUTIC NUCLEAR MEDICINE BY INJECTION						
CPT	70100	Radionuclide therapy, polycythemia vera, chronic leukemia, each treatment	\$36.82	\$34.11	\$12.57	\$41.41	\$41.41	N.A.
		OBSTETRICAL ULTRASOUND						
APG#	340	Echography, pregnant uterus, 8-scan and/or real time with image documentation; complete (complete feta	\$98.21	\$70.22	\$75.59	\$104.62	\$69.91	\$86.51
CPT	76805	DIAGNOSTIC ULTRASOUND EXCEPT OBSTETRICAL						
APG#	346	Ophthalmic biometry by ultrasound echography, A-mode; with intraocular lens power calculation	\$39.83	\$39.83	N.A.	\$52.14	\$52.14	\$14.11
CPT	76519	Echography, abdominal, B-scan and/or real time with image documentation; complete	\$82.54	\$57.32	\$56,16	\$71.91	\$58.62	\$47.80
CPT			102101	101102	10011			
APG#	348	MAGNETIC RESONANCE IMAGING Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	\$147.67	\$66.31	\$129.66	\$135.34	\$135.34	\$159.96
CPT	70551	Magnetic resonance (eg. proton) imaging, brain (including brain stern), without contrast material	+147107	100.0.	1.20.00			
APG#	349	COMPUTERIZED AXIAL TOMOGRAPHY	\$40.70	\$26.63	\$38.23	\$44.82	\$50.11	\$20.46
CPT	70450	Computerized axial tomography; head or brain without contrast material	\$56.08	\$40.14	\$45.92	\$55.06	\$60.13	\$30.61
CPT		Computerized axial tomography; head or brain without contrast material, followed by contrast material(s)	\$66.31	\$53.10	\$47.75	\$82.59	\$90.19	\$45.92
CPT		Computerized axial tomography; abdomen with contrast material(s)	900.31	403.10	447.73	VUZ.00	450.15	4.10102
APG#		MAMMOGRAPHY	\$40.13	\$21.21	\$32.38	\$31.37	\$21.99	\$24.13
CPT		Mammography; bilateral	940.13	921.21	932.30	731.37	421.00	VZ-4.10
APG#		PLAIN FILM	110.00	\$6.93	\$11.15	\$6.94	\$6.01	\$3.82
CPT		Radiologic examination, chest; single view, frontal	\$10.88		\$11.15	\$9.25	\$7.29	\$5.36
CPT		Radiologic examination, chest; two views, frontal and lateral	\$12.96	\$9.46		\$17.95	\$18.41	\$10.53
CPT	73510	Radiologic examination, hip; complete, minimum of two views	\$18.08	\$16.13	\$8.43			\$10.53
CPT		Radiologic examination, foot; anteroposterior and lateral views complete, minimum of three views	\$17.95	\$13.32	\$11.58	\$16.52	\$13.00	\$10.54
APG#		FLUOROSCOPY						100.00
CPT		Radiologic examination, chest, two views, frontal and lateral with fluoroscopy	\$36.06	\$24.25	\$33.27	\$40.32	\$29.04	\$35.56
APG#	353	CEREBRAL, PULMONARY, CERVICAL & SPINAL ANGIOGRAPHY		1				
CPT	75673	Angiography, carotid, cerebral, bilateral; catheter, complete	\$206.09	\$129.51	\$183.40	N.A.	N.A.	N.A.
APG#	354	VENOGRAPHY OF EXTREMITY						
CPT	75821	Venography, extremity, unilateral, complete procedure	\$59.04	\$39.89	\$44.03	\$92.18	\$92.18	\$45.33
APG#	. 355	NON-CARDIAC, NON-CEREBRAL VASCULAR RADIOLOGY						
CPT		Aortography, abdominal plus bilateral iliofemoral lower extremity, catheter	\$163.87	\$117.77	\$109.51	N.A.	N.A.	N.A.
APG#		DIGESTIVE RADIOLOGY						
CPT	74240	Radiologic examination, gastrointestinal tract, upper; with or without delayed films, without KU8	\$40.01	\$32.27	\$30.99	\$44.62	\$41.41	\$27.85
CPT	74270	Radiologic examination, colon; barium enema	\$61.74	\$47.11	\$41.67	\$55.18	\$41.49	\$35.41
CPT	74280	Radiologic examination, colon; air contrast with specific high density barium with or without glucagon	\$80.68	\$61.04	\$55.46	\$72.51	\$55.31	\$48.17
APG#		UROGRAPHY & GENITAL RADIOLOGY						
CPT CPT	74400	Urography (pyelography), intravenous, with or without KU8, with or without tomography	\$71.89	\$58.75	\$45.33	\$65.42	\$52.05	\$40.73
CPT	74416	Urography, infusion, drip technique and/or bolus technique with nephrotomography	\$74.80	\$60.97	\$57.12	\$45.81	\$43.97	\$13.49
APG#		ARTHROGRAPHY				1		
CPT		Radiologic examination, shoulder, arthrography; complete procedure	\$59.67	\$45.64	\$38.78	\$47.25	\$43.97	\$33.98
APG#		MYELOGRAPHY						
		Myelography, lumbosacral; complete procedure	\$71.09	\$50.94	\$45.26	\$124.23	\$124.23	N.A.
CPT		MISCELLANEOUS RADIOLOGY			1			
APG#		Mammary ductogram or galactogram, multiple ducts; complete procedure	\$91.45	\$80.28	\$40,46	N.A.	N.A.	N.A.
CPT	/6089	International Americanism of Asiacrostians' monthly accept complete brossess	1	1				
		AGGREGATE MEAN FOR ALL RADIOLOGY PROCEDURES	\$75.79	\$55.79	\$56.51	\$65.80	\$57.52	\$47.4

	MEAN.	MEDIAN, & STANDARD DEVIATION FOR TOTAL INDIF	ECT COST	S - RADIO	LOGY PRO	CEDURE	S	
	11111111111		Hospitals			PI	Office	
RADIOLOGY					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	344	RADIATION THERAPY						
CPT	77430	Weekly megavoltage treatment management; complex	\$199.03	\$199.03	\$249.23	N.A.	N.A.	N.A.

		MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT LABOR COSTS - RAD		Hospitals	ŝ	Phy	sicians' C	Office
					Standard			Standard
RADIOLOGY		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviatio
PROCEDURES								
APG#	341	SIMPLE DIAGNOSTIC NUCLEAR MEDICINE	\$23.83	\$12.64	\$28.85	\$17.69	\$17.69	N.A.
CPT		Bone imaging; whole body						
APG#	342	COMPLEX DIAGNOSTIC NUCLEAR MEDICINE	\$48.14	\$27.34	\$55.92	\$31.84	\$31.84	\$33.91
CPT	78461	Myocardial perfusion imaging; exercise and redistribution, qualitative or quantitative	*****					
APG#	343	THERAPEUTIC NUCLEAR MEDICINE BY INJECTION	\$3.23	\$3.66	\$2.14	\$1.97	\$1.97	N.A.
CPT		Radionuclide therapy, polycythemia vera, chronic leukemia, each treatment	V3.23	40.00	V2111	*****		_
APG#	345	O8STETRICAL ULTRASOUND	\$20.90	\$11.79	\$27.84	\$15.54	\$11.79	\$10.1
CPT	76805	Echography, pregnant uterus, 8-scan and/or real time with image documentation; complete (complete fet	720.50	V11.73	427.04	* 1010 1		
APG#	346	DIAGNOSTIC ULTRASOUND EXCEPT OBSTETRICAL	\$7.69	\$7.69	N.A.	\$6.20	\$6.20	\$4.60
CPT	76519	Ophthalmic blometry by ultrasound echography, A-mode; with intraocular lens power calculation		\$10.56	\$20.89	\$17.24		\$10.6
CPT	76700	Echography, abdominal, 8-scan and/or real time with image documentation; complete	\$17.52	\$10.50	\$20.03	V17.24	V10.02	71010
APG#	348	MAGNETIC RESONANCE IMAGING	\$29.74	\$11,51	\$52.48	\$11.79	\$11.79	N.A.
CPT	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	\$29.74	911.51	952.40	VII./5	V11.75	10.00
APG#	349	COMPUTERIZED AXIAL TOMOGRAPHY	40.44	\$3.79	\$13.41	\$7,10	\$7.10	\$5.87
CPT	70450	Computerized axial tomography; head or brain without contrast material	\$8.44	\$6.25	\$9.04	\$8.72	\$8.72	\$6.77
CPT	70470	Computerized axial tomography; head or brain without contrast material, followed by contrast material(s)	\$8.98				\$13.08	\$10.1
CPT	74160	Computerized axial tomography; abdomen with contrast material(s)	\$14.58	\$8.46	\$17.20	\$13.08	\$13.08	\$10.1
APG#		MAMMOGRAPHY		1		1170	\$3.93	\$3.27
CPT	76091	Mammography; bilateral	\$8.65	\$4.54	\$9.71	\$4.72	\$3.93	\$3.27
APG#		PLAIN FILM					11.05	\$0.80
CPT	71010	Radiologic examination, chest; single view, frontal	\$2.33	\$1.09	\$3.78	\$1.49	\$1.35	
CPT	71020	Radiologic examination, chest; two views, frontal and lateral	\$2.67	\$1.45	\$3.69	\$1.85	\$1.32	\$1.42
CPT	73510	Radiologic examination, hip; complete, minimum of two views	\$2.73	\$2.10	\$1.82	\$3.64	\$3.01	\$2.61
CPT	73630	Radiologic examination, foot; anteroposterior and lateral views complete, minimum of three views	\$2.97	\$1.98	\$2.92	\$3.00	\$3.01	\$1.74
APG#		FLUOROSCOPY						
CPT CPT	71023	Radiologic examination, chest, two views, frontal and lateral with fluoroscopy	\$9.62	\$4.72	\$9.77	\$7.63	\$1.97	\$10.9
APG#	353			İ				
		Angiography, carotid, cerebral, bilateral; catheter, complete	\$43.48	\$23.40	\$53.51	N.A.	N.A.	N.A.
CPT		VENOGRAPHY OF EXTREMITY					I	
APG#	354	Venography, extremity, unilateral, complete procedure	\$13.25	\$7.20	\$15.35	\$9.70	\$9.70	\$5.3
CPT	355	NON-CARDIAC, NON-CEREBRAL VASCULAR RADIOLOGY						
APG#	355	Aortography, abdominal plus bilateral iliofemoral lower extremity, catheter	\$35.17	\$19.21	\$39.67	N.A.	N.A.	N.A
CPT								
APG#	356	DIGESTIVE RADIOLOGY Radiologic examination, gastrointestinal tract, upper; with or without delayed films, without KU8	\$8.07	\$5.26	\$9.10	\$8.48	\$5.86	\$8.5
CPT	74240	Radiologic examination, gastrointestinal tract, upper, with or without delayed mins, without	\$12.85	\$6.70	\$14.87	\$8.87	\$9.70	\$5.9
CPT	74270	Radiologic examination, colon; barium enema Radiologic examination, colon; air contrast with specific high density barium with or without glucagon	\$16.92		\$19.85	\$11.83	\$12.93	\$7.9
CPT			11000	12.55				
APG#	357	UROGRAPHY & GENITAL RADIOLOGY	\$15.02	\$8,91	\$15.42	\$11.17	\$13.50	\$4.5
CPT	74400	Urography (pyelography), intravenous, with or without KUB, with or without tomography	\$18.85		\$18.55	\$13.81		
CPT		Urography, infusion, drip technique and/or bolus technique with nephrotomography	\$10.00	913.01	V10.55	410.01	* 10101	+
APG#	358	ARTHROGRAPHY	\$11.50	\$6,29	\$10.72	\$9.09	\$9.03	\$8.3
CPT		Radiologic examination, shoulder, arthrography; complete procedure	911.50	40.23	V10.72	40.00	75.55	
APG#	359	MYELOGRAPHY	614.01	\$8.02	\$14.26	\$5.90	\$5.90	N.A
CPT	7226	Myelography, lumbosacral; complete procedure	\$14.31	\$8.02	914.20	90.50	45.50	14.7
APG#	360	MISCELLANEOUS RADIOLOGY	10000	444	40.01	N A	N.A.	N.A
CPT	7608	Mammary ductogram or galactogram, multiple ducts; complete procedure	\$15.22	\$14.49	\$8.01	N.A.	N.A.	I N.A

Physicians' Office Standard

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PROCEDURES	APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	1,
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							Т
		-					t
	 	-					t
APG#	RADIATION THERAPY Weekly megavoltage treatment management; complex	N.A.	N.A.	N.A.	N.A.	N.A.	h

MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT LABOR COSTS - RADIOLOGY PROCEDURES

Hospitals

Standard Mean Median Deviation Mean Median Deviation

RADIOLOGY

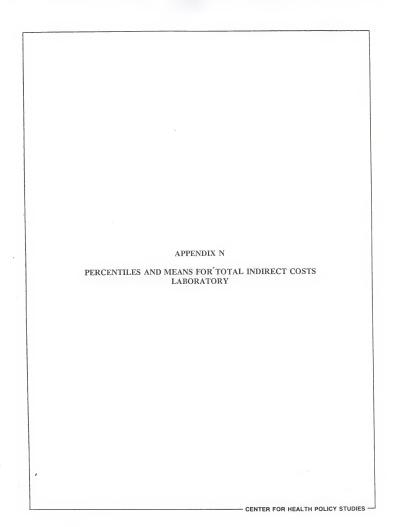
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		MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT EQUIPMENT COSTS - RA		Hospitals	3	Phy	sicians' C	Office
					Standard			Standar
RADIOLOGY		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviatio
PROCEDURES	0.14	SIMPLE DIAGNOSTIC NUCLEAR MEDICINE						
APG#	341		\$44.71	\$45.60	\$14.63	\$49.40	\$45.60	\$17.41
CPT		Bone imaging; whole body						
APG#	342	COMPLEX DIAGNOSTIC NUCLEAR MEDICINE  Myocardial perfusion imaging; exercise and redistribution, qualitative or quantitative	\$88.16	\$76.00	\$36.31	\$70.93	\$45.60	\$57.55
CPT	78461	Myocardial perfusion imaging; exercise and redistribution, qualitative or quantitative						
APG#	343	THERAPEUTIC NUCLEAR MEDICINE BY INJECTION	\$22.04	\$15.20	\$13.81	\$7.60	\$7.60	N.A.
CPT		Radionuclide therapy, polycythemia vera, chronic leukemia, each treatment	VEE!O!					
APG#	345	OBSTETRICAL ULTRASOUND	\$38.00	\$34.20	\$9.55	\$41.80	\$45.60	\$8.50
CPT	76805	Echography, pregnant uterus, 8-scan and/or real time with image documentation; complete (complete fetal a	400.00	404120	10.00			
APG#	346	DIAGNOSTIC ULTRASOUND EXCEPT OBSTETRICAL	622.90	\$22.80	N.A.	\$17.10	\$17,10	\$8.06
CPT	76519	Ophthalmic biometry by ultrasound echography, A-mode; with intraocular lens power calculation		\$34.20	\$11.03		\$30.40	\$11.53
CPT		Echography, abdominal, 8-scan and/or real time with image documentation; complete	\$33.20	934.20	\$11.03	723.04	¥30.40	711.00
APG#	348	MAGNETIC RESONANCE IMAGING	\$48.71	\$41.80	\$21,48	\$30.40	\$20.40	\$21.50
CPT		Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	\$48.71	941.00	921.40	\$30.40	\$30.40	VZ 1.00
APG#	349	COMPUTERIZED AXIAL TOMOGRAPHY	\$15,41	\$11.40	\$7.90	\$15.20	¢15.20	\$3.80
CPT	70450	Computerized axial tomography; head or brain without contrast material		\$19.00		\$17.73		\$4.39
CPT	70470	Computerized axial tomography; head or brain without contrast material, followed by contrast material(s) an	\$23.01			\$26.60		\$6.58
CPT	74160	Computerized axial tomography; abdomen with contrast material(s)	\$27,12	\$22.80	\$10.10	\$20.00	\$22.80	90.00
APG#	350	MAMMOGRAPHY		1	45.00	\$13.57	A1 F 20	\$2.03
CPT	76091	Mammography; bilateral	\$13.77	\$11.40	\$5.08	\$13.57	\$15.20	\$2.03
APG#		PLAIN FILM		10.01	10.10	\$3.26	\$2.28	\$1.95
CPT	71010	Radiologic examination, chest; single view, frontal	\$4.01	\$3.04	\$2.43	\$4.10	\$3.42	\$1.90
CPT	71020	Radiologic examination, chest; two views, frontal and lateral	\$4.94	\$3.80	\$2.33		\$7.60	\$1.90
CPT	73510	Radiologic examination, hip; complete, minimum of two views	\$9.00	\$7.60	\$3.63	\$7.60		\$1.39
CPT	73630	Radiologic examination, foot; anteroposterior and lateral views complete, minimum of three views	\$7.68	\$7.60	\$0.35	\$6.92	\$7.60	\$1.39
APG#	352	FLUOROSCOPY					10.50	1 440 70
CPT	71023	Radiologic examination, chest, two views, frontal and lateral with fluoroscopy	\$11.59	\$10.26	\$5.25	\$15.20	\$9.50	\$12.79
APG#	353	CEREBRAL, PULMONARY, CERVICAL & SPINAL ANGIOGRAPHY						-
CPT		Angiography, carotid, cerebral, bilateral; catheter, complete	\$68.13	\$60.80	\$22.82	N.A.	N.A.	N.A.
APG#		VENOGRAPHY OF EXTREMITY			1			
CPT		Venography, extremity, unilateral, complete procedure	\$22.80	\$22.80	\$0.00	\$22.80	\$22.80	\$0.00
APG#	355	NON-CARDIAC, NON-CEREBRAL VASCULAR RADIOLOGY						
CPT	75631	Aortography, abdominal plus bilateral iliofemoral lower extremity, catheter	\$64.84	\$57.00	\$31.63	N.A.	N.A.	N.A.
APG#		DIGESTIVE RADIOLOGY						
CPT CPT	74240	Radiologic examination, gastrointestinal tract, upper; with or without delayed films, without KU8	\$15.65	\$15.20	\$5.33		\$15.20	
CPT		Radiologic examination, colon; barium enema	\$23.94	\$22.80	\$3.51	\$24.07	\$22.80	
	74270	Radiologic examination, colon; air contrast with specific high density barium with or without glucagon	\$31.16	\$30.40	\$1,99	\$31.03	\$30.40	\$1.55
CPT ·		UROGRAPHY & GENITAL RADIOLOGY						
APG#	307	Urography (pyelography), intravenous, with or without KU8, with or without tomography	\$26.12	\$22.80	\$5.35	\$22.80	\$22.80	\$0.00
CPT	74400	Urography, infusion, drip technique and/or bolus technique with nephrotomography	\$26.60		\$6:89	\$22.80	\$22.80	\$0.00
CPT			1					
APG#	358	ARTHROGRAPHY	\$23,42	\$22.80	\$6.62	\$19.00	\$22.80	\$10.0
CPT		Radiologic examination, shoulder, arthrography; complete procedure		1.22100	1	1	-	1
APG#		MYELOGRAPHY	\$27.61	\$22.80	\$6.96	\$22.80	\$22.80	N.A
CPT		Myelography, lumbosacral; complete procedure	1/2/101	722.50	10.00	122.50		1
APG#	360	MISCELLANEOUS RADIOLOGY	¢33 57	\$30.40	\$10.31	N.A.	N.A.	N.A.
CPT	76089	Mammary ductogram or galactogram, multiple ducts; complete procedure	V03.07	750.40	7.0.31	14.74.	11171	+
		AGGREGATE MEAN FOR ALL RADIOLOGY PROCEDURES	A 20 01	\$25.83	\$9.91	622 EC	\$20.98	\$8.50

			Hospitals			Ph	Office	
RADIOLOGY					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
	-							
APG#	344	RADIATION THERAPY			i			
CPT	77430	Weekly megavoltage treatment management; complex	\$98.80	\$98.80	\$107.48	N.A.	N.A.	N.A.

		MEAN, MEDIAN, & STANDARD DEVIATION FOR OVERHEAD COSTS - RAD		Hospitals		Ph	vsicians' Of	fice
				Hospitais	Standard		, or or or or	Standard
RADIOLOGY			Mean	Median		Mean	Median	Deviation
PROCEDURES		APG & CPT DESCRIPTION	iviean	Median	Deviation	IAIC GII	Micdian	Deviduor
APG#	341	SIMPLE DIAGNOSTIC NUCLEAR MEDICINE	470.00	\$44.90	\$60.30	\$153.84	\$153.84	\$187.75
CPT		8one imaging; whole body	\$72.22	\$44.90	\$60.30	9103.04	9103.04	¥107.75
APG#	342	COMPLEX DIAGNOSTIC NUCLEAR MEDICINE		\$59.56	\$129.64	\$107.56	6107 FC	\$28.02
CPT	78461	Myocardial perfusion imaging; exercise and redistribution, qualitative or quantitative	\$135.34	\$59.56	\$129.64	\$107.56	\$107.50	920.02
APG#	343	THERAPEUTIC NUCLEAR MEDICINE BY INJECTION			111.00	\$31.84	\$31.84	N.A.
CPT	79100	Radionuclide therapy, polycythemia vera, chronic leukemia, each treatment	\$15.25	\$9.46	\$14.02	\$31.84	\$31.84	N.A.
APG#	345	OBSTETRICAL ULTRASOUND				100.07	400.07	\$84.28
CPT	76805	Echography, pregnant uterus, 8-scan and/or real time with image documentation; complete (complete	\$54.86	\$28.75	\$54.13	\$66.87	\$32.07	\$84.28
APG#	346	DIAGNOSTIC ULTRASOUND EXCEPT OBSTETRICAL			-			100 77
CPT	76519	Ophthalmic biometry by ultrasound echography, A-mode; with intraocular lens power calculation	\$9.34	\$9.34	N.A.	\$28.84	\$28.84	\$26.77
CPT	76700	Echography, abdominal, B-scan and/or real time with image documentation; complete	\$45.45	\$26.58	\$40.63	\$39.90	\$28.52	\$41.49
APG#	348	MAGNETIC RESONANCE IMAGING						
CPT	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	\$77.34	\$54.02	\$77.73	\$99.04	\$99.04	\$130.13
APG#	349	COMPUTERIZED AXIAL TOMOGRAPHY						
CPT	70450	Computerized axial tomography; head or brain without contrast material	\$24.35	\$12.51	\$25.72	\$24.89	\$19.86	\$20.83
CPT	70470	Computerized axial tomography; head or brain without contrast material, followed by contrast materia	\$32.50	\$15.35	\$34.93	\$31.52	\$23.83	\$29.10
CPT	74160	Computerized axial tomography; abdomen with contrast material(s)	\$35.60	\$22.24	\$33.34	\$47.27	\$35.74	\$43.65
APG#		MAMMOGRAPHY						
CPT CPT		Mammography; bilateral	\$24.60	\$19.11	\$22.91	\$16.83	\$6.30	\$23.37
APG#		PLAIN FILM						
		Radiologic examination, chest; single view, frontal	\$6.12	\$2.70	\$7.39	\$3.06	\$1.96	\$3.26
CPT		Radiologic examination, chest, two views, frontal and lateral	\$7,18	\$3.60	\$7.92	\$4.07	\$2.42	\$3.83
CPT	71020	Radiologic examination, criest, two views, north and actors.  Radiologic examination, hip; complete, minimum of two views	\$8.73	\$7.13	\$6.18	\$8.46	\$4.29	\$9.74
CPT	73510	Radiologic examination, hip, complete, minimum and lateral views complete, minimum of three views	\$9.78	\$6.01	\$9.45	\$8.17	\$4.12	\$9.92
CPT								
APG#	352	FLUOROSCOPY Radiologic examination, chest, two views, frontal and lateral with fluoroscopy	\$21.10	\$7.67	\$24.69	\$19.40	\$18.55	\$16.70
CPT		CEREBRAL, PULMONARY, CERVICAL & SPINAL ANGIOGRAPHY						
APG#	353		\$124.72	\$82.37	\$132.62	N.A.	N.A.	N.A.
CPT		Angiography, carotid, cerebral, bilateral; catheter, complete	V12-117E	100.01			1	1
APG#	354	VENOGRAPHY OF EXTREMITY	\$32.88	\$23.02	\$32.36	\$59.68	\$59.68	\$50.70
CPT	75821	Venography, extremity, unilateral, complete procedure	VUZ.00	420.02	402.100	100.00		
APG#	355	NON-CARDIAC, NON-CEREBRAL VASCULAR RADIOLOGY	\$85.55	\$59.58	\$81,39	N.A.	N.A.	N.A.
CPT		Aortography, abdominal plus bilateral iliofemoral lower extremity, catheter	900.00	V30.00	401100	14171	111111	+
APG#	356	DIGESTIVE RADIOLOGY	\$22.67	\$12.96	\$24.18	\$18.83	\$16.60	\$14.52
CPT		Radiologic examination, gastrointestinal tract, upper; with or without delayed films, without KUB	\$34.65	\$24.64	\$30.56	\$30.24	\$14.23	\$37.03
CPT	74270	Radiologic examination, colon; barium enema		\$32.85	\$40.85	\$40.32	\$18.97	\$49.38
CPT	74280	Radiologic examination, colon; air contrast with specific high density barium with or without glucagon	\$45.32	\$3Z.00	\$40.00	940.32	910.37	743.30
APG#	357	UROGRAPHY & GENITAL RADIOLOGY			\$33.37	\$34.24	\$17.18	\$41.50
CPT	74400	Urography (pyelography), intravenous, with or without KU8, with or without tomography	\$40.50	\$35.27	\$40.55	\$13.81	\$10.54	\$8.85
CPT	74415	Urography, infusion, drip technique and/or bolus technique with nephrotomography	\$46.11	\$38.36	\$40.55	\$13.81	\$10.54	\$0.00
APG#	358	ARTHROGRAPHY				400.00	\$19,41	\$28.11
CPT	73041	Radiologic examination, shoulder, arthrography; complete procedure	\$34.89	\$24.64	\$30.10	\$26.22	\$19.41	\$20.11
APG#	359	MYELOGRAPHY			100.00	405.55	405.50	11.6
CPT	72266	Myelography, lumbosacral; complete procedure	\$42.42	\$34.43	\$35.56	\$95.53	\$95.53	N.A.
APG#	360	MISCELLANEOUS RADIOLOGY				-		
CPT	76089	Mammary ductogram or galactogram, multiple ducts; complete procedure	\$45.20	\$33.35	\$34.88	N.A.	N.A.	N.A.
					1	1 440 40	ADE 40	\$40.41
		AGGREGATE MEAN FOR ALL RADIOLOGY PROCEDURES	\$42.02	\$27.05	\$40.98	\$42.10	\$35.46	\$40.41

			AD COSTS - RADIOLOGY PI			Ph	Office	
RADIOLOGY					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
PROCEDURES		Ald d di i bassim iist.						
APG#	344	RADIATION THERAPY						
CPT	77430	Weekly megavoltage treatment management; complex	\$200.47	\$200.47	N.A.	N.A.	N.A.	N.A.



		MEAN, MEDIAN, & STANDARD DEVIATION FOR TOTAL INDIRECT COSTS - LABO		Hospital		Phy	sicians' Of	fice
,				Hospital	Standard		J. C. C.	Standard
ABORATORY	1		Mean	Median	Deviation	Mean	Median	Deviatio
PROCEDURES		APG & CPT DESCRIPTION	iviean	Median	Deviation	Widaii	Wicdian	DUVIGUE
APG#	417	TISSUE TYPING		110.00	\$19.53	N.A.	N.A.	N.A.
CPT		Blood crossmatch antiglobulin technique	\$38.23	\$43.80	\$19.53	N.A.	IV.A.	14.74.
APG#	419	SIMPLE IMMUNOLOGY TESTS				N.A.	N.A.	N.A.
CPT	86422	Radioallergosorbent test, in vitro testing for allergen-specific IgE; 6 or more tests	\$16.40	\$16.40	N.A.		\$25.33	\$2.44
CPT		Rheumatoid factor; qualitative	\$22.58	\$11.43	\$20.83	\$25.33	\$25.33	\$2.44
APG#	421	SIMPLE MICROSIOLOGY TESTS					101.00	40.40
CPT		Culture, bacterial, definitive; any other source		\$54.02	\$44.39	\$94.96	\$94.96	\$9.13
CPT		Culture, bacterial, urine; quantitative, colony count	\$23.68	\$14.60	\$24.15	\$31.65	\$31.65	\$3.05
CPT	87088	Culture, bacterial, urine identification, in addition to quantitative or commercial kit	\$38.63		\$26.35	\$79.14	\$79.14	\$7.59
CPT	97101	Culture, fungi, isolation (with or without presumptive identification); skin	\$96.48	\$98.43	\$52.55	\$189.93	\$189.93	\$18.24
CPT	07101	Sensitivity studies, antibiotic; disk method, per plate (12 or less disks)	\$9.19	\$8.97	\$4.63	\$31.65	\$31.65	\$3.05
	07104	Smear, primary source, with interpretation; routine stain for bacteria, fungi, or cell types	\$24.61	\$14.77	\$20.97	\$28.49	\$28.49	\$2.73
CPT	87205	Smear, primary source w/interpretation; wet mount w/simple stain, for bacteria, fungi, ova, and/or parasi	\$27.85	\$19.69	\$20.50	\$37.99	\$37.99	\$3.64
CPT	8/210	COMPLEX MICROBIOLOGY TESTS						
APG#	422	Culture, bacterial, definitive; blood (includes anaerobic screen)	\$61.55	\$54.02	\$52.33	\$61.16	\$61.16	\$38.68
CPT			\$43.65	\$31.00	\$31.29	\$63.31	\$63.31	\$6.08
CPT	87045	Culture, bacterial, definitive; stool  Ova and parasites, direct smears, concentration and identification	\$94.12	\$58.40	\$123.63	\$160.43	\$160.43	\$59.97
CPT			7.5			-		
APG#		SIMPLE ENDOCRINOLOGY TESTS	\$7.62	\$8.20	\$3.94	\$5.90	\$5.90	N.A.
CPT		Thyroxine, binding globulin (T8G)	\$8.20	\$8.20	N.A.	N.A.	N.A.	N.A.
CPT		Thyroxine, (t-4), cpb or resin uptake	VU.20	VU.E.0	140741	- 110.11		
APG#	425	8ASIC CHEMISTRY TESTS	\$13.15	\$7.92	\$11.70	\$6.33	\$6.33	\$0.61
CPT		Glucose except urine (eg, blood, spinal fluid, joint fluid)	\$8.28	\$4.96	\$9.05	\$6.33	\$6.33	\$0.61
CPT	84132	Potassium; blood	\$17.09	\$7.10	\$24.54	\$6.33	\$6.33	\$0.61
CPT		Triglycerides, blood	\$17.09	\$7.10	924.54	40.33	40.55	40.01
APG#	426	SIMPLE CHEMISTRY TESTS		44.00	\$8,63	\$8.09	\$8.86	\$2.52
CPT	82270	Blood occult; feces screening	\$9.61	\$4.92		\$5.90	\$5,90	N.A.
CPT	84479	Tridothyronine (T-3); resin uptake	\$12.49	\$9.00	\$11.96			
CPT	94700	Analysis of arterial blood gas (oxygen saturation, po2, pco2)	\$40.53	\$11.86	\$79.62	\$29.79	\$29.79	\$2.02
APG#		COMPLEX CHEMISTRY TESTS						-
CPT		Hemoglobin; glycated	\$40.57	\$10.57	\$61.59	N.A.	N.A.	N.A.
CPT	82718	Lipoprotein, direct measurement; high density cholesterol (HDL cholesterol)	\$14.12		\$11.13	\$15.83	\$15.83	\$1.51
CPT	92720	Lipoprotein, direct measurement; high density cholesterol (IDL cholesterol)	\$33.74	\$18.01	\$37.22	\$16.90	\$16.90	N.A.
APG#	429	MULTICHANNEL CHEMISTRY TESTS						
CPT	90016	Automated multichannel test; 13-16 clinical chemistry tests	\$24.81	\$16.40	\$25.40	\$31.65	\$31.65	\$3.05
	80010	Automated multichannel test, 19 or more clinical chemistry tests	\$24.99	\$17.93	\$21.81	\$33.81	\$33.81	N.A.
CPT		SIMPLE TOXICOLOGY TESTS				1		
APG#			\$13.17	\$9.85	\$10.56	N.A.	N.A.	N.A.
CPT		Immunoassay technique for drugs						
APG#	. 431	URINALYSIS Urinalysis routine (pH, specific gravity, protein, uroglobin, any number of these constituents; with micros	\$14.29	\$8.77	\$12.29	\$20.25	\$20.25	\$4.74
CPT			\$6.30	\$5.62	\$4.68	\$4.14	\$4.14	\$3.71
CPT		Urinalysis routine, without microscopy, non-automated	40.00	YOTOL				
APG#		THERAPEUTIC DRUG MONITORING	\$12.81	\$10,11	\$10.81	\$11,40	\$11.40	\$7.78
CPT		Phenytoin	\$11.88	\$8.50	\$11.54	\$6.33	\$6.33	\$0.61
CPT		Theophylline, blood or saliva	V 1 1.00	V3.50	V.1.54	10.00		1
APG#	433	RADIOIMMUNOASSAY TESTS	\$19.09	\$9.79	\$23.70	\$16.90	\$16.90	N.A.
CPT	82643	Digoxin	\$19.09		\$12.58	\$205.78	\$205.78	
CPT	84436	Thyroxine; total				\$53.66	\$53.66	\$67.54
CPT	84443	Thyroid stimulating hormone (TSH), RIA or EIA	\$12.57		\$10.74			
CPT	96151	Carcinoembryonic antigen (CEA), RIA or EIA	\$19.77	\$18.10	\$11.37	\$202.83	\$202.83	N.A.

				Hospital	\$	Ph	ysiclans' O	
LABORATORY					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
	434	SIMPLE CLOTTING TESTS						
APG#		Prothrombin time	\$17.69	\$10.46	\$18.94	\$21.94	\$21.94	\$2.35
CPT		Thromboplastin time, partial (PTT); plasma or whole blood	\$25,13	\$21.74	\$23.21	\$48.55	\$48.55	\$26.95
CPT			10011					
APG#		SIMPLE HEMATOLOGY TESTS	\$30.51	\$18.03	\$37.61	\$31.65	\$31.65	\$3.05
CPT	85022	Blood count; hemogram, automated, and manual differential WBC count (CBC)	\$19.00	\$19.00	\$1.34	\$28.71	\$28.71	\$7.22
CPT		Blood count; hemogram, manual, complete CBC (RBC, WBC, Hgb, Hct, differential and indices)	V13.00	V13.00	V11.0-1	420171	120.7	
APG#		LITHIUM LEVEL MONITORING	\$15.75	\$9.73	\$17,41	N.A.	N.A.	N.A.
CPT		Lithium, blood, quantitative	\$15.75	99.73	917.41	IN.A.	14.74.	14.541
APG#	440	8LOOD AND URINE DIPSTICK TESTS	10.00		45.00	A1 A	N.A.	N.A.
CPT	8294B	Glucose; blood, reagent strip	\$7.07	\$4.73	\$5.32	N.A.	N.A.	IN.A.
		AGGREGATE MEAN FOR ALL LABORATORY PROCEDURES	\$25.86	\$18.69	\$24.61	\$47.74	\$47.76	\$20.43

				Hospital	s	Pt	nysicians'	Office
ABORATORY					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	420	COMPLEX IMMUNOLOGY TESTS						
CPT	86999	Unlisted transfusion medicine procedure	\$45.02	\$45.02	N.A.	N.A.	N.A.	N.A.
APG#		COMPLEX ENDOCRINOLOGY TESTS						
CPT	83500	Hydroxyproline; free	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#		COMPLEX TOXICOLOGY TESTS						
CPT	83015	Heavy metal (arsenic, barium, beryllium, bismuth, antimony, mercury); screen	\$8.20	\$8.20	N.A.	N.A.	N.A.	N.A.
APG#		COMPLEX CLOTTING TESTS						
CPT	85210	Clotting; factor II, prothrombin, specific	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	437	COMPLEX HEMATOLOGY TESTS			1			
CPT	85999	Unlisted hematology and coagulation procedure	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.

86151

MEAN, MEDIA			Hos	pitals			Physicia	ns' Office	
LABORATORY				Standard				Standard	
PROCEDURES	-	Mean	Median	Deviation	Count	Mean	Median	Deviation	Count
APG#	434								
CPT	85610	\$17.69	\$10.46	\$18.94	23	\$21.94	\$21.94	\$2.35	5
CPT	85730	\$25.13	\$21.74	\$23.21	23	\$48.55	\$48.55	\$26.95	4
APG#	436								
CPT	85022	\$30.51	\$18.03	\$37.61	20	\$31.65	\$31.65	\$3.05	6
CPT	85031	\$19.00	\$19.00	\$1.34	10	\$28.71	\$28.71	\$7.22	2
APG#	439								
CPT	83725	\$15.75	\$9.73	\$17.41	16	N.A.	N.A.	N.A.	1
APG#	440								
CPT	82948	\$7.07	\$4.73	\$5.32	8	N.A.	N.A.	N.A.	2

	MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT LABOR COSTS - LAI		Hospital	s	Phy	siclans' Of	fice
				Standard			Standar
LABORATORY	APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviatio
PROCEDURES	417 TISSUE TYPING						
APG#	86074 Blood crossmatch antiglobulin technique	\$4.29	\$4.29	\$1.14	N.A.	N.A.	N.A.
CPT		-					
APG#	419 SIMPLE IMMUNOLOGY TESTS  86422 Radioallergosorbent test, in vitro testing for allergen-specific IgE; 6 or more tests	\$1,16	\$1.16	N.A.	N.A.	N.A.	N.A.
CPT		\$3.38	\$4.50	\$2.12	\$13.43	\$13.43	\$1.08
CPT	86430 Rheumatoid factor; qualitative	10.00					
APG#	421 SIMPLE MICROBIOLOGY TESTS	\$9.39	\$9.41	\$4.14	\$50.38	\$50.38	\$4.07
CPT	87070 Culture, bacterial, definitive; any other source	\$3.52	\$3.52	\$3.34	\$16.80	\$16.80	\$1.35
CPT	87086 Culture, bacterial, urine; quantitative, colony count	\$5.20	\$5.20	\$3.25	\$41.99	\$41.99	\$3.39
CPT	87088 Culture, bacterial, urine identification, in addition to quantitative or commercial kit	\$12.50	\$12.50	\$7.80	\$100.77	\$100.77	\$8.15
CPT	87101 Culture, fungi, isolation (with or without presumptive identification); skin	\$1.04	\$1.04	\$0,65	\$16.80	\$16.80	\$1,35
CPT	87184 Sensitivity studies, antibiotic; disk method, per plate (12 or less disks)	\$3.01	\$2.70	\$2.14	\$15.12	\$15.12	\$1,22
CPT	87205 Smear, primary source, with interpretation; routine stain for bacteria, fungi, or cell types		\$3.60	\$1.95	\$20.16	\$20.16	\$1.63
CPT	87210 Smear, primary source w/interpretation; wet mount w/simple stain, for bacteria, fungi, ova, and/or paras	(8 \$3.43	\$3.00	\$1.55	720.10	920.10	71.00
APG#	422 COMPLEX MICROSIOLOGY TESTS	\$9.39	\$9.41	\$4.14	\$34.55	\$34.55	\$26.46
CPT	87040 Culture, bacterial, definitive; blood (includes anaerobic screen)			\$3.25	\$33.59	\$33.59	\$2.72
CPT	87045 Culture, bacterial, definitive; stool	\$5.72	\$6.00		\$83.01	\$83.01	\$16.9
CPT	87177 Ova and parasites, direct smears, concentration and identification	\$11.79	\$6.00	\$13.88	\$83.01	\$83.01	\$10.91
APG#	423 SIMPLE ENDOCRINOLOGY TESTS					10.00	
CPT	84435 Thyroxine, binding globulin (T8G)	\$0,89	\$0.89	\$0.44	\$3.55	\$3.55	N.A.
CPT	84442 Thyroxine, (t-4), cpb or resin uptake	\$0.58	\$0.58	N.A.	N.A.	N.A.	N.A.
APG#	425 BASIC CHEMISTRY TESTS		1				
CPT	82947 Glucose except urine (eg, blood, spinal fluid, joint fluid)	\$1.22	\$0.70	\$0.98	\$3.36	\$3.36	\$0.27
CPT	84132 Potassium; blood	\$1.10	\$0.60	\$1.09	\$3.36	\$3.36	\$0.27
CPT	84478 Triglycerides, blood	\$2.35	\$0.60	\$3.05	\$3.36	\$3.36	\$0.27
APG#	426 SIMPLE CHEMISTRY TESTS						
CPT CPT	82270 Blood occult; feces screening	\$1.30	\$1.76	\$0.83	\$3.97	\$4.75	\$1.88
	84479 Tridothyronine (T-3); resin uptake	\$1.47	\$0.90	\$1.28	\$3.55	\$3.55	N.A.
CPT	94700 Analysis of arterial blood gas (oxygen saturation, po2, pco2)	\$17.64	\$1.08	\$43.93	\$5.18	\$5.18	\$0.59
CPT							
APG#	427 COMPLEX CHEMISTRY TESTS	\$6,17	\$6.17	\$7.91	N.A.	N.A.	N.A.
CPT	83036 Hemoglobin; glycated	\$1.67	\$1.50	\$1,19	\$8.40	\$8.40	\$0.68
CPT	83718 Lipoprotein, direct measurement; high density cholesterol (HDL cholesterol)	\$5.31	\$5,31	\$4,96	\$7.92	\$7.92	N.A.
CPT	83720 Lipoprotein, direct measurement; high density cholesterol (IDL cholesterol)	70101	10101		-	1	
APG#	428 MULTICHANNEL CHEMISTRY TESTS	\$3.35	\$3.00	\$2.38	\$16.80	\$16.80	\$1.35
CPT	80016 Automated multichannel test; 13-16 clinical chemistry tests	\$3.35	\$3.00	\$2.38	\$15.84	\$15.84	N.A.
CPT	80019 Automated multichannel test, 19 or more clinical chemistry tests	93.30	\$3.00	72.30	¥15.04	V10.04	11111
APG#	429 SIMPLE TOXICOLOGY TESTS	14.05	\$1.25	\$0.78	N.A.	N.A.	N.A
CPT	82662 Immunoassay technique for drugs	\$1.25	\$1.25	\$0.78	N.A.	IN.M.	18.00
APG#	431 URINALYSIS	11.00	14.40	44.07	A11.00	\$11.06	\$4.44
CPT	81000 Urinalysis routine (pH, specific gravity, protein, uroglobin, any number of these constituents; with micro	c \$1.77	\$1.49	\$1.27	\$11.06	\$3,17	N.A.
CPT	81002 Urinalysis routine, without microscopy, non-automated	\$0.89	\$0.89	\$0.44	\$3.17	\$3.17	N.A.
APG#	432 THERAPEUTIC DRUG MONITORING					10.00	40.0
CPT	84045 Phenytoin	\$1.57	\$1.20	\$1.22	\$5.73	\$5.73	\$3.09
CPT	84420 Theophyline, blood or saliva	\$1.50	\$1.20	\$1.32	\$3.36	\$3.36	\$0.27
APG#	433 RADIOIMMUNOASSAY TESTS						-
CPT CPT	82643 Digoxin	\$2.79	\$1.80	\$2.73	\$7.92	\$7.92	N.A
CPT	84436 Thyroxine; total	\$1.76	\$1.76	\$1.67	\$96.79	\$96.79	\$131,8
CPT	84443 Thyroid stimulating hormone (TSH), RIA or EIA	\$1.65	\$1.20	\$1.13	\$25.53	\$25.53	\$31.0
CPT	86151 Carcinoembryonic antigen (CEA), RIA or EIA	\$2.46	\$2.33	\$0.43	\$95.01	\$95.01	N.A.

## APPENDIX N

				Hospital	\$	Ph	ysicians' O	ffice
ABORATORY					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	434	SIMPLE CLOTTING TESTS						
CPT		Prothrombin time	\$2.68	\$2.40	\$1.90	\$11.85	\$11.85	\$3.32
CPT		Thromboplastin time, partial (PTT); plasma or whole blood	\$3.54	\$2.40	\$2.03	\$24.71	\$24.71	\$9.84
APG#		SIMPLE HEMATOLOGY TESTS				L		
CPT		Blood count; hemogram, automated, and manual differential WBC count (CBC)	\$4.16	\$1.80	\$4.55	\$16.80	\$16.80	\$1.35
CPT	85031	Blood count; hemogram, manual, complete CBC (RBC, WBC, Hgb, Hct, differential and indices)	\$1.52	\$1.52	\$0.34	\$15.02	\$15.02	\$1.16
APG#		LITHIUM LEVEL MONITORING						
CPT		Lithium, blood, quantitative	\$1.84	\$0.81	\$1.97	N.A.	N.A.	N.A.
APG#		8LOOD AND URINE DIPSTICK TESTS						
CPT		Glucose; blood, reagent strip	\$1.50	\$1.50	N.A.	N.A.	N.A.	N.A.
		AGGREGATE MEAN FOR ALL LABORATORY PROCEDURES	\$3.69	\$2.90	\$3,68	\$24.08	\$24.11	\$9.63

				Hospita	Is	Ph	Office	
LABORATORY					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	420	COMPLEX IMMUNOLOGY TESTS						
CPT	86999	Unlisted transfusion medicine procedure	\$4.50	\$4.50	N.A.	N.A.	N.A.	N.A.
APG#	424	COMPLEX ENDOCRINOLOGY TESTS	T					
CPT	83500	Hydroxyproline; free	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	430	COMPLEX TOXICOLOGY TESTS	1					
CPT	83015	Heavy metal (arsenic, barium, beryllium, bismuth, antimony, mercury); screen	\$0.58	\$0.58	N.A.	N.A.	N.A.	N.A.
APG#	435	COMPLEX CLOTTING TESTS	T					
CPT	85210	Clotting; factor II, prothrombin, specific	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	437	COMPLEX HEMATOLOGY TESTS						
CPT	85999	Unlisted hematology and coagulation procedure	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.

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MEAN, MEDIA					Host					Physicia	ns' Office	
LABORATORY		-					andard				Standard	
PROCEDURES		1	Vlean	N	ledian	De	viation	Count	Mean	Median	Deviation	Count
CPT	84420	Ś	1.50	ŝ	1.20	\$	1.32	21.00	\$3.36	\$3.36	0.27	4
APG#	433	<u> </u>										
CPT	82643	\$	2.79	\$	1.80	\$	2.73	10.00	\$7.92	\$7.92	N.A.	2
CPT	84436	\$	1.76	\$	1.76	\$	1.67	8.00	\$96.79	\$96.79	131.85	2
CPT	84443	\$	1.65	\$	1.20	\$	1.13	20.00	\$25.53	\$25.53	31.08	6
CPT	86151	\$ -	2.46	\$	2.33	\$	0.43	16.00	\$95.01	\$95.01	N.A.	2
APG#	434	-										
CPT	85610	\$	2.68	\$	2.40	\$	1.90	23.00	\$11.85	\$11.85	3.32	5
CPT	85730	\$	3.54	\$	2.40	\$	2.03	23.00	\$24.71	\$24.71	9.84	4
APG#	435	1										
CPT	85210		N.A.		N.A.		N.A.	4.00	N.A.	N.A.	N.A.	
APG#	436	1										
CPT	85022	\$	4.16	\$	1.80	\$	4.55	20.00	\$16.80	\$16.80	1.35	6
CPT	85031	\$	1.52	\$	1.52	\$	0.34	10.00	\$15.02	\$15.02	1.16	2
APG#	437											
CPT	85999		N.A.		N.A.		N.A.	3.00	N.A.	N.A.	N.A.	1
APG#	439											
CPT	83725	\$	1.84	\$	0.81	\$	1.97	16.00	N.A.	N.A.	N.A.	1
APG#	440											
CPT	82948	\$	1.50	\$	1.50		N.A.	8.00	N.A.	N.A.	N.A.	2

		MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT EQUIPMENT COSTS - LA		Hospital	4	Phy	sicians' O	ffice
				riospitai	Standard		oloidile e	Standard
LABORATORY			Mean	Median	Deviation	Mean	Median	Deviation
PROCEDURES		APG & CPT DESCRIPTION	Micali	IVICUIAII	Deviation	INICOLI	111001011	
APG#		TISSUE TYPING	\$18.70	\$19.76	\$11.33	N.A.	N.A.	N.A.
CPT		Blood crossmatch antiglobulin technique	₹18.70	915.70	V11.55	14.73.	141711	1100
APG#	419	SIMPLE IMMUNOLOGY TESTS	\$7.60	\$7.60	N.A.	N.A.	N.A.	N.A.
CPT		Radioallergosorbent test, in vitro testing for allergen-specific IgE; 6 or more tests	\$6.84	\$6.08	\$2.54	\$6.08	\$6.08	\$0.00
CPT	86430	Rheumatoid factor; qualitative	\$6.84	\$6.08	92.54	\$0.00	90.00	¥0.00
APG#		SIMPLE MICROSIOLOGY TESTS	105.10	\$28,50	\$10.18	\$22.80	\$22.80	\$0.00
CPT		Culture, bacterial, definitive; any other source	\$25.46	\$7.60	\$1.98	\$7,60	\$7.60	\$0.00
CPT	87086	Culture, bacterial, urine; quantitative, colony count	\$8.06		\$1.90	\$19.00	\$19.00	\$0.00
CPT	87088	Culture, bacterial, urine identification, in addition to quantitative or commercial kit	\$18.05	\$19.00		\$45.60	\$45.60	\$0.00
CPT	87101	Culture, fungi, isolation (with or without presumptive identification); skin	\$45.60		\$0.00			\$0.00
CPT	87184	Sensitivity studies, antibiotic; disk method, per plate (12 or less disks)	\$4.75	\$3.80	\$1.90	\$7.60	\$7.60	\$0.00
CPT	87205	Smear, primary source, with interpretation; routine stain for bacteria, fungi, or cell types	\$7.75	\$6.84	\$2.04	\$6.84	\$6.84	
CPT	87210	Smear, primary source w/interpretation; wet mount w/simple stain, for bacteria, fungi, ova, and/or parasi	\$9.12	\$9.12	\$1.61	\$9.12	\$9.12	\$0.00
APG#	422	COMPLEX MICROBIOLOGY TESTS						110 7
CPT	87040	Culture, bacterial, definitive; blood (includes anaerobic screen)	\$20.90	\$23.18	\$14.81	\$15.20	\$15.20	\$10.75
CPT		Culture, bacterial, definitive; stool	\$15.20		\$4.16	\$15.20	\$15.20	\$0.00
CPT	87177	Ova and parasites, direct smears, concentration and identification	\$24.62	\$15.20	\$15.13	\$38.00	\$38.00	\$10.75
APG#	422	SIMPLE ENDOCRINOLOGY TESTS						
CPT CPT		Thyroxine, binding globulin (TBG)	\$3.80	\$3.04	\$2.28	\$1.52	\$1.52	N.A.
CPT		Thyroxine, (t-4), cpb or resin uptake	\$3.80	\$3.80	N.A.	N.A.	N.A.	N.A.
		BASIC CHEMISTRY TESTS						
APG#	425	Glucose except urine (eg, blood, spinal fluid, joint fluid)	\$6.08	\$2.66	\$8.26	\$1.52	\$1.52	\$0.00
CPT		Potassium; blood	\$2.53	\$2.28	\$0.78	\$1.52	\$1.52	\$0.00
CPT		Triglycerides, blood	\$4.81	\$3.04	\$3.90	\$1.52	\$1.52	\$0.00
CPT		SIMPLE CHEMISTRY TESTS						
APG#			\$2.74	\$2,28	\$1.02	\$2.28	\$2.28	\$0.00
CPT		Blood occult; feces screening	\$3.95	\$3.80	\$2.18	\$1.52	\$1.52	N.A.
CPT	84479	Tridothyronine (T-3); resin uptake	\$12.09	\$7.60	\$6.32	\$13,30	\$13.30	\$2.69
CPT		Analysis of arterial blood gas (oxygen saturation, po2, pco2)						
APG#		COMPLEX CHEMISTRY TESTS	\$9.50	\$9.50	\$4,91	N.A.	N.A.	N.A.
CPT	83036	Hemoglobin; glycated	\$5.45	\$3.80	\$4.82	\$3,80	\$3.80	\$0,00
CPT	83718	Lipoprotein, direct measurement; high density cholesterol (HDL cholesterol)	\$10.03	\$11.40	\$3.06	\$3.80	\$3.80	N.A.
CPT		Lipoprotein, direct measurement; high density cholesterol (IDL cholesterol)	V10.03	011.40	40.00	40100	10.00	1
APG#		MULTICHANNEL CHEMISTRY TESTS	\$6,69	\$7.60	\$2.04	\$7.60	\$7.60	\$0.00
CPT	80016	Automated multichannel test; 13-16 clinical chemistry tests	\$8.36	\$7.60	\$3.56	\$7.60	\$7.60	N.A.
CPT	80019	Automated multichannel test, 19 or more clinical chemistry tests	\$8.30	\$7.00	43.00	\$7.00	V7.00	14174
APG#	429	SIMPLE TOXICOLOGY TESTS		11.50	40.55	N. A.	N.A.	N.A.
CPT	82662	Immunoassay technique for drugs	\$7.60	\$4.56	\$8.55	N.A.	N.A.	IV.A.
APG#	431	URINALYSIS	1			1101	44.04	A1.C1
CPT	81000	Urinalysis routine (pH, specific gravity, protein, uroglobin, any number of these constituents; with micros	\$4.67	\$4.56	\$1.11	\$4.94	\$4.94	\$1.61
CPT	81002	Urinalysis routine, without microscopy, non-automated	\$2.85	\$3.04	\$0.96	\$1.52	\$1.52	\$0.00
APG#	432	THERAPEUTIC DRUG MONITORING			1			14.04
CPT		Phenytoin	\$4.69	\$3.80	\$3.34	\$2.66	\$2.66	\$1.61
CPT		Theophylline, blood or saliva	\$4.05	\$2.66	\$3.68	\$1.52	\$1.52	\$0.00
APG#		RADIOIMMUNOASSAY TESTS						
CPT		Digoxin	\$5.19	\$4.56	\$1.95	\$3.80	\$3.80	N.A.
CPT		Thyroxine; total	\$4.56	\$3.80	\$2.06	\$46.36	\$46.36,	\$63:41
CPT		Thyroid stimulating hormone (TSH), RIA or EIA	\$4.18	\$3.42	\$1.97	\$12.16	\$12.16	\$15.05
CPT	0615	Carcinoembryonic antigen (CEA), RIA or EIA	\$8.36	\$6.46	\$5.52	\$45.60	\$45.60	N.A.

## APPENDIX N

				Hospital	s	Ph	ysicians' O	ffice
					Standard			Standard
LABORATORY		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
PROCEDURES							1	
APG#		SIMPLE CLOTTING TESTS	\$4.94	\$6.08	\$1,78	\$5.32	\$5.32	\$1.07
CPT		Prothrombin time					\$11.40	\$5.37
CPT	85730	Thromboplastin time, partial (PTT); plasma or whole blood	\$8.23	\$6.84	\$5.74	\$11.40	\$11.40	95.37
APG#	436	SIMPLE HEMATOLOGY TESTS						
CPT	85022	Blood count; hemogram, automated, and manual differential WBC count (CBC)	\$8.49	\$7.98	\$2.65	* \$7.60	\$7.60	\$0.00
CPT	85031	Blood count; hemogram, manual, complete CBC (RBC, WBC, Hgb, Hct, differential and indices)	\$5.32	\$5.32	\$4.30	\$6.84	\$6.84	\$1.07
APG#	439	LITHIUM LEVEL MONITORING		l	1			
CPT		Lithium, blood, quantitative	\$4.41	\$5.32	\$2.49	N.A.	N.A.	N.A.
APG#		BLOOD AND URINE DIPSTICK TESTS						-
CPT		Glucose; blood, reagent strip	\$3.42	\$3.80	\$0.76	N.A.	N.A.	N.A.
		AGGREGATE MEAN FOR ALL LABORATORY PROCEDURES	\$9.11	\$8.49	\$4.04	\$11.43	\$11.43	\$4.05

				Hospital	s	Ph	ysicians' O	ffice
LABORATORY					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	420	COMPLEX IMMUNOLOGY TESTS						
CPT	86999	Unlisted transfusion medicine procedure	\$11.40	\$11.40	N.A.	N.A.	N.A.	N.A.
APG#	424	COMPLEX ENDOCRINOLOGY TESTS						
CPT	83500	Hydroxyproline; free	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#		COMPLEX TOXICOLOGY TESTS						
CPT	83015	Heavy metal (arsenic, barium, beryllium, bismuth, antimony, mercury); screen	\$3.80	\$3.80	N.A.	N.A.	N.A.	N.A.
APG#	435	COMPLEX CLOTTING TESTS					1	
CPT	85210	Clotting; factor II, prothrombin, specific	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	437	COMPLEX HEMATOLOGY TESTS						
CPT	85999	Unlisted hematology and coagulation procedure	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.

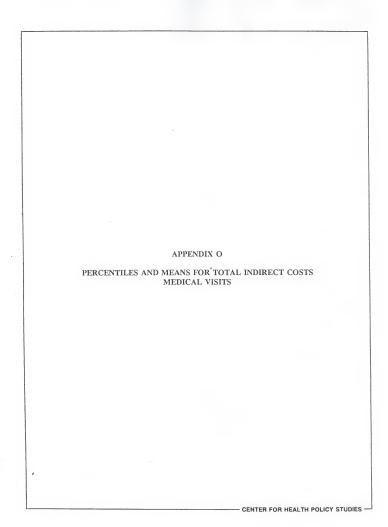
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LABORATORY				Standard				Standard	
PROCEDURES		Mean	Median	Deviation	Count	Mean	Median	Deviation	Coun
CPT	84420	\$4.05	\$2.66	\$3.68	21	\$1.52	\$1.52	\$0.00	4
APG#	433								
CPT	82643	\$5.19	\$4.56	\$1.95	10	\$3.80	\$3.80	N.A.	2
CPT	84436	\$4.56	\$3.80	\$2.06	8	\$46.36	\$46.36	\$63.41	2
CPT	84443	\$4.18	\$3.42	\$1.97	20	\$12.16	\$12.16	\$15.05	6
CPT	86151	\$8.36	\$6.46	\$5.52	16	\$45.60	\$45.60	N.A.	2
APG#	434								
CPT	85610	\$4.94	\$6.08	\$1.78	23	\$5.32	\$5.32	\$1.07	5
CPT	85730	\$8.23	\$6.84	\$5.74	23 .	\$11.40	\$11.40	\$5.37	4
APG#	435								
CPT	85210	N.A.	N.A.	N.A.	4	N.A.	N.A.	N.A.	
APG#	436								
CPT	85022	8.49	7.98	2.65	20	\$7.60	\$7.60	\$0.00	6
CPT	85031	5.32	5.32	4.3	10	\$6.84	\$6.84	\$1.07	2
APG#	437								
CPT	85999	N.A.	N.A.	N.A.	3	N.A.	N.A.	N.A.	1
APG#	439								
CPT	83725	4.41	5.32	2.49	16	N.A.	N.A.	N.A.	1
APG#	440								
CPT	82948	3,42	3.8	0.76	8	N.A.	N.A.	N.A.	2

		MEAN, MEDIAN, & STANDARD DEVIATION FOR OVERHEAD COSTS - LABOR,		Hospitals		Phy	sicians' Of	lfica
				Tiuspiteis	Standard		0.0.0.0	Standard
LABORATORY			Mean	Median	Deviation	Mean	Median	Deviation
PROCEDURES		APG & CPT DESCRIPTION	Ivieari	Mediali	Deviation	IVICUIT	111001011	-
APG#		TISSUE TYPING	\$22.26	622.22	\$9.62	N.A.	N.A.	N.A.
CPT		Blood crossmatch antiglobulin technique	922.20	\$23.23	73.02	14.74	140711	7117.11
APG#	419	SIMPLE IMMUNOLOGY TESTS	\$7.64	\$7.64	N.A.	N.A.	N.A.	N.A.
CPT	86422	Radioallergosorbent test, in vitro testing for allergen-specific IgE; 6 or more tests	\$16.86	\$6.11	\$17.93	\$5,81	\$5.81	\$3.52
CPT	86430	Rheumatoid factor; qualitative	\$16.86	\$0.11	\$17.93	90.01	95.01	VJ.52
APG#	421	SIMPLE MICROSIOLOGY TESTS			100.00	\$21.78	\$21.78	\$13.19
CPT	87070	Culture, bacterial, definitive; any other source	\$46.21	\$34.39	\$37.73	\$7.26	\$7.26	\$4,40
CPT	87086	Culture, bacterial, urine; quantitative, colony count	\$17.77		\$23.57	\$18.15	\$18.15	\$10.99
CPT	87088	Culture, bacterial, urine identification, in addition to quantitative or commercial kit	\$23.97		\$22.53			\$26.38
CPT	87101	Culture, fungi, isolation (with or without presumptive identification); skin	\$57.36		\$43.29	\$43.57	\$43.57	\$4,40
CPT	87184	Sensitivity studies, antibiotic; disk method, per plate (12 or less disks)	\$5.22	\$3.82	\$3.98	\$7.26	\$7.26	
CPT	97205	Smart primary source with interpretation; routine stain for bacteria, fungi, or cell types	\$18.81	\$12.17	\$20.18	\$6.54	\$6.54	\$3.98
CPT	87210	Smear, primary source w/interpretation; wet mount w/simple stain, for bacteria, fungi, ova, and/or parasi	\$20.84	\$16.23	\$19.78	\$8.71	\$8.71	\$5.28
APG#	422	COMPLEX MICROBIOLOGY TESTS						
CPT CPT	87040	Culture, bacterial, definitive; blood (includes anaerobic screen)		\$34.39	\$41.11	\$11.41	\$11.41	\$1.47
CPT		Culture, bacterial, definitive; stool	\$30.71		\$29.86	\$14.52	\$14.52	\$8.80
CPT	97177	Ova and parasites, direct smears, concentration and identification	\$78.03	\$25.81	\$114.69	\$39.41	\$39.41	\$32.26
APG#		SIMPLE ENDOCRINOLOGY TESTS			1			
CPT CPT		Thyroxine, binding globulin (TBG)	\$4.33	\$3.72	\$2.41	\$0.83	\$0.83	N.A.
CPT		Thyroxine, (t-4), cpb or resin uptake	\$3.82	\$3.82	N.A.	N.A.	N.A.	N.A.
		BASIC CHEMISTRY TESTS						
APG#	92047	Glucose except urine (eg, blood, spinal fluid, joint fluid)	\$7.76	\$4.59	\$7.63	\$1.45	\$1.45	\$3.88
CPT		Potassium; blood	\$6.23	\$2.72	\$8.42	\$1.45	\$1.45	\$0.88
CPT		Triglycerides, blood	\$13.32	\$3.82	\$22.18	\$1.45	\$1.45	\$0.80
CPT		SIMPLE CHEMISTRY TESTS						
APG#	426		\$7,62	\$6.97	\$7.35	\$1.84	\$1.25	\$1.10
CPT		Blood occult; feces screening	\$9.57	\$4.82	\$11.38	\$0.83	\$0.83	N.A.
CPT	84479	Tridothyronine (T-3); resin uptake  Analysis of arterial blood gas (oxygen saturation, po2, pco2)	\$21,45	\$4,70	\$43.70	\$11.31	\$11.31	\$4.12
CPT	94700	Analysis of afterial blood gas (oxygen saturation, poz., pedz)						
APG#		COMPLEX CHEMISTRY TESTS	\$37.31	\$3.82	\$59.47	N.A.	N.A.	N.A.
CPT	83036	Hemoglobin; glycated	\$9.40	\$4.27	\$9.93	\$3.63	\$3,63	\$2.19
CPT	83718	Lipoprotein, direct measurement; high density cholesterol (HDL cholesterol)	\$26.98		\$35.29	\$5.18	\$5.18	N.A.
CPT	83720	Lipoprotein, direct measurement; high density cholesterol (IDL cholesterol)	720100	1				1
APG#	426	MULTICHANNEL CHEMISTRY TESTS	\$20.14	\$13.53	\$23.24	\$7.26	\$7.26	\$4,40
CPT	80016	Automated multichannel test; 13-16 clinical chemistry tests	\$17.95	\$7.64	\$20.49	\$10.37	\$10.37	N.A.
CPT	80019	Automated multichannel test, 19 or more clinical chemistry tests	V17.55	47.04	720110	1.0.0.	1	-
APG#		SIMPLE TOXICOLOGY TESTS	\$6.34	\$5.50	\$3.85	N.A.	N.A.	N.A.
CPT .	82662	Immunoassay technique for drugs	70.34	40.00	40.00	1		-
APG#	431	URINALYSIS	A10.05	\$5.99	\$11.29	\$4.25	\$4.25	\$1.32
CPT	81000	Urinalysis routine (pH, specific gravity, protein, uroglobin, any number of these constituents; with micros	\$10.05	\$3.82	\$3.67	\$2.07	\$2.07	N.A.
CPT	81002	Urinalysis routine, without microscopy, non-automated	\$4.01	\$3.82	\$3.07	92.07	92.07	IV.A.
APG#	432	THERAPEUTIC DRUG MONITORING	10.00	\$3.82	\$10.09	\$3.00	\$3.00	\$3,98
CPT	84045	Phenytoin	\$8.80		\$10.09	\$1.45	\$1.45	\$0.88
CPT		Theophylline, blood or saliva	\$8.49	\$3.20	910.30	91.40	91.45	+0.88
APG#	433	RADIOIMMUNOASSAY TESTS		44.50	101.55	45.40	AF 10:	NI A
CPT	82643	3 Digoxin	\$15.00		\$21.55	\$5.18	\$5.18	N.A.
CPT		Thyroxine; total	\$9.02	\$3.72	\$11.67	\$62.64	\$62.64	\$87.41
CPT		Thyroid stimulating hormone (TSH), RIA or EIA	\$9.07	\$5.35	\$9.96	\$15.97	\$15.97	\$21.41
CPT		Carcinoembryonic antigen (CEA), RIA or EIA	\$12.22	\$13.59	\$8.80	\$62.22	\$62.22	N.A.

49		MEAN, MEDIAN, & STANDARD DEVIATION FOR OVERHEAD COSTS - LAE		Hospital		Ph	ysicians' O	ffice
LABORATORY	-				Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	434	SIMPLE CLOTTING TESTS						
CPT	85610	Prothrombin time	\$13.69	\$6.11	\$16.94	\$4.77	\$4.77	\$2.05
CPT		Thromboplastin time, partial (PTT); plasma or whole blood	\$18.16	\$15.28	\$20.37	\$12.45	\$12.45	\$11.73
APG#		SIMPLE HEMATOLOGY TESTS						
CPT	85022	Blood count; hemogram, automated, and manual differential W8C count (C8C)	\$23.93	\$11.65	\$34.27	\$7.26	\$7.26	\$4.40
CPT		Blood count; hemogram, manual, complete CBC (RBC, WBC, Hgb, Hct, differential and indices)	\$12.16	\$12.16	\$5.30	\$6.84	\$6.84	\$4.99
APG#		LITHIUM LEVEL MONITORING						
CPT	83725	Lithium, blood, quantitative	\$10.23	\$3.88	\$15.06	N.A.	N.A.	N.A.
APG#	440	8LOOD AND URINE DIPSTICK TESTS						
CPT	82948	Glucose; blood, reagent strip	\$4.37	\$2.72	\$4.74	N.A.	N.A.	N.A.
		AGGREGATE MEAN FOR ALL LABORATORY PROCEDURES	\$18.05	\$10.59	\$21.15	\$12.30	\$12.28	\$9.87

				Hospital	\$	Pł	nysicians'	Office
ARORATORY					Standard			Standard
PROCEDURES		APG & CPT DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	420	COMPLEX IMMUNOLOGY TESTS						
CPT	86999	Unlisted transfusion medicine procedure	\$29.12	\$29.12	N.A.	N.A.	N.A.	N.A.
APG#	424	COMPLEX ENDOCRINOLOGY TESTS						
CPT	83500	Hydroxyproline; free	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	430	COMPLEX TOXICOLOGY TESTS						
CPT	83015	Heavy metal (arsenic, barium, beryllium, bismuth, antimony, mercury); screen	\$3.82	\$3.82	N.A.	N.A.	N.A.	N.A.
APG#	435	COMPLEX CLOTTING TESTS	I					
CPT	85210	Clotting; factor II, prothrombin, specific	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#		COMPLEX HEMATOLOGY TESTS						
CPT	85999	Unlisted hematology and coagulation procedure	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.

			Hos	pitals	Physicians' Office					
LA80RATORY				Standard				Standard		
PROCEDURES		Mean	Median	Deviation	Count	Mean	Median	Deviation	Count	
CPT	84420	\$8.49	\$3.20	\$10.30	21	\$1.45	\$1.45	\$0.88	4	
APG#	433									
CPT	82643	\$15.00	\$4.59	\$21.55	10	\$5.18	\$5.18	N.A.	2	
CPT	84436	\$9.02	\$3.72	\$11.67	8	\$62.64	\$62.64	\$87.41	2	
CPT	84443	\$9.07	\$5.35	\$9.96	20	\$15.97	\$15.97	\$21.41	6	
CPT	86151	\$12.22	\$13.59	\$9.88	16	\$62.22	\$62.22	N.A.	2	
APG#	434									
CPT	85610	\$13.69	\$6.11	\$16.94	23	\$4.77	\$4.77	\$2.05	5	
CPT	85730	\$18.16	\$15.28	\$20.37	23	\$12.45	\$12.45	\$11.73	4	
APG#	435									
CPT	85210	N.A.	N.A.	N.A.	4	N.A.	N.A.	N.A.		
APG#	436									
CPT	85022	23.93	11.65	34.27	20	\$7.26	\$7.26	\$4.40	6	
CPT	85031	12.16	12.16	5.3	10	\$6.84	\$6.84	\$4.99	2	
APG#	437									
CPT	85999	N.A.	N.A.	N.A.	3	N.A.	N.A.	N.A.	1	
APG#	439									
CPT	83725	10.23	3.88	15.06	16	N.A.	N.A.	N.A.	1	
APG#	440									
CPT	82948	4.37	2.72	4.74	8	N.A.	N.A.	N.A.	2	



		MEAN, MEDIAN, & STANDARD DEVIATION FOR TOTAL INDIRECT COSTS -	Hospitals Physicians' Office					
			-	Tiospitara	Standard		y sicians o	Standar
MEDICAL		APG & ICD-9 DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviatio
PROCEDURES	601	HEMATOLOGICAL MALIGNANCY	IVICUIT	iviculari	Deviation	1110011	- INTO GROOT	001.000
APG#		Acute lymphoid leukemia	\$144.86	\$155.78	\$35.47	\$44.42	\$35.76	\$30.97
ICD9 CODE	204.0		V144.00	¥100.70	400.47	V-1-1-12	400170	100101
APG#	602 185	PROSTATIC MALIGNANCY	\$84,44	\$65.35	\$55.64	\$55.94	\$43.98	\$33.32
ICD9 CODE		Malignant neoplasm prostate	401.11	700.00	400101	*****	110.00	100.00
APG#	603	LUNG MALIGNANCY	\$91.58	\$98.77	\$35.18	\$54.57	\$44.33	\$38.38
ICD9 CODE	162.9	Malignant neoplasm of bronchus and lung unspecified	V31.00	450.77	400.10	404.07	414.00	+00.00
APG#	604	SKIN MALIGNANCY	\$61.94	\$52.27	\$41.33	\$39.08	\$33.74	\$14.97
ICD9 CODE		Other malignant neoplasm of skin , site unspecified	701.54	432.27	V41.55	V33.00	V33.74	V14.07
APG#	605	MALIGNANCIES EXCEPT HEMATOLOGICAL, PROSTATIC, LUNG & SKIN	\$74.21	\$65.35	\$39.33	\$34.34	\$23.96	\$20.01
ICD9 CODE	174.9	Malignant neoplasm of female breast, unspecified	\$74.21	\$00.30	\$39.33	\$34.34	923.30	\$20.01
APG#	616	POISONING	\$194.66	\$142.51	\$187.88	\$104.68	\$86,44	\$77.74
ICD9 CODE		Toxic effect of other substances, venom	\$194.00	\$142.51	\$187.00	\$104.00	\$00,44	9//./4
APG#	632	BURNS, & SKIN & SOFT TISSUE INJURY	\$60.80	\$47.44	\$42.85	\$39.09	\$37.03	\$21.02
ICD9 CODE		Open wound of finger(s) without mention of complication	\$42.79	\$47.44	\$26.72	\$27.81	\$19.45	\$16.23
ICD9 CODE		Attention to surgical dressings and sutures (change of dressing, removal of sutures)	\$42.79	\$30.00	\$20.72	\$27.01	919.45	910.23
APG#	633	FRACTURE, DISLOCATION & SPRAIN	4447.50	\$117.82	\$69.68	\$62.19	\$51.16	\$49.71
ICD9 CODE	820.8	Fracture of neck of femur unspecified, closed	\$117.59		\$69.68	\$02.19	\$51.16	\$49.71
APG#	648			1101.05	110.00	445.04	440.55	\$11.55
ICD9 CODE	290.0	Senile and presenile organic psychotic conditions, senile dementia, uncomplicated	\$107.28	\$101.05	\$42.03	\$45.91	\$42.55	\$11.00
APG#	649							
ICD9 CODE		Neurotic disorders, anxiety states	\$98.92	\$75.79	\$54.87	\$55.59	\$54.45	\$22.09
APG#	661							
ICD9 CODE	305.90	Nondependent abuse of drugs, other, mixed, of unspecified drug abuse	\$176.10	\$148.96	\$123.05	\$32.02	\$32.02	\$4.03
APG#	662		1					
ICD9 CODE	303.90	Alcohol dependence syndrome, other and unspecified alcohol dependence	\$150.72	\$101.05	\$106.12	\$41.46	\$34.87	\$18.59
APG#	691	ROUTINE PRENATAL CARE						
ICD9 CODE	V22.1	Supervision of other normal pregnancy	\$32.78	\$26.67	\$14.55	\$30.50	\$27.29	\$19.48
APG#	692	MATERNAL ANTEPARTUM COMPLICATION						
ICD9 CODE		Early or threatened labor, threatened premature labor	\$66.25	\$33.38	\$79.09	\$49.91	\$48.27	\$27.93
APG#	693	ROUTINE POSTPARTUM COMPLICATION						
ICD9 CODE	V24.2	Routine postpartum follow-up	\$44.71	\$38.57	\$14.19	\$30.80	\$22.58	\$21.94
APG#	694	MATERNAL POSTPARTUM COMPLICATION						
ICD9 CODE	646.80	Other complications of pregnancy, not elsewhere classified, other specified complication of pregnancy	\$34.26	\$34.26	\$4.08	\$46.65	\$40.59	\$33.29
APG#	721	SYSTEMIC INFECTIOUS DISEASE						
ICD9 CODE	136.9	Other unspecified infectious and parasitic diseases	\$61.43	\$44.35	\$33.30	\$55.56	\$53.64	\$25.53
APG#	722							
ICD9 CODE	616.10	Inflammatory disease of cervix, vagina, and vulva - Vaginitis and vulvovaginitis	\$62.26	\$45.44	\$40.36	\$26.91	\$22.58	\$12.26
APG#	736	TIA, CVA, & OTHER CEREBROVASCULAR EVENTS						
ICD9 CODE	436.0	Acute, but ill-defined, cerebrovascular disease	\$116.81	\$87.82	\$72.88	\$42.95	\$38.40	\$23.37
APG#	737	HEADACHE						
CD9 CODE		Symptoms involving head and neck - headache	\$72.81	\$77.34	\$35.65	\$32.71	\$22.26	\$25.64
APG#	738	CENTRAL NERVOUS SYSTEM DISEASES EXCEPT TIA, CVA, & HEADACHE						
ICD9 CODE		General symptoms - convulsions	\$109.37	\$91.02	\$38.03	\$77.96	\$69.72	\$23.14
APG#	751	CATARACTS						
CD9 CODE		Cataract - senile cataract, unspecified	\$60.47	\$62.24	\$6.44	\$69.32	\$59.76	\$25.20
ICD9 CODE		Cataract - unspecified visual disturbance	\$58.62	\$65.84	\$16.26	\$69.32	\$59.76	\$25.2
		REFRACTION DISORDER	-					
APG#	752							

		MEAN, MEDIAN, & STANDARD DEVIATION FOR TOTAL INDIRECT COSTS - N		Hospitals			Physicians' Office		
					Standard			Standard	
MEDICAL		- Proposition	Mean	Median	Deviation	Mean	Median	Deviation	
ROCEDURES		APG & ICD-9 DESCRIPTION	INICOTI						
PG#		CONJUNCTIVITIS & OTHER SIMPLE EXTERNAL EYE INFLAMMATION	\$44.36	\$46.68	\$18,30	\$33.35	\$27.09	\$18.98	
CD9 CODE	373.00	Inflammation of eyelids - blepharitis	744.30	V40.00	410.00	100:00			
APG#	. 754	EYE DISEASE EXCEPT CATARACT, REFRACTION DISORDER & CONJUNCTIVITIS	\$55.51	\$54.45	\$9,43	\$61.84	\$65.90	\$21.34	
CD9 CODE	365.11	Glaucoma - primary open angle glaucoma	\$29.45	\$29.45	\$13.36	\$60.94	\$68.37	\$26.8	
CD9 CODE	365.9	Glaucoma - unspecified	\$56.33	\$46.68	\$22.75	\$45.20	\$38.89	\$18.0	
CD9 CODE	375.15	Disorders of lacrimal system - other disorders - tear film insufficiency, unspecified	\$50.33	940.00	VZZ.73	440.E0	100100		
APG#	766	DENTAL DISEASE	\$33.14	\$25.94	\$22.60	\$26.70	\$21,46	\$12.7	
CD9 CODE		Other after following surgery	\$33.14	\$25.94	\$22.00	\$20.70	921.40	V12.7	
APG#	769	ACUTE NONINFECTIOUS EAR, NOSE, & THROAT DISEASE			\$50,64	\$43.40	\$31.05	\$29.8	
CD9 CODE		Symptoms involving head and neck - epistaxis	\$92.63	\$87.82	\$50.64	\$43.40	\$31.00	V23.0	
APG#	771	HEARING LOSS				\$28.81	\$18.74	\$14.8	
CD9 CODE		Hearing loss - unspecified	\$62.98	\$29.47	\$54.44	\$28.81	\$18.74	914.0	
APG#	772	OTHER EAR, NOSE, THROAT, & MOUTH DISEASES				100.05	400.10	\$14.5	
	200.4	Diseases of external ear - impacted cerumen	\$67.25	\$45.30	\$47.40	\$36.85	\$32.18		
CD9 CODE	380.4	Anomalies of ear causing impairment of hearing - unspecified anomaly of ear with impairment of hearing	\$66.07	\$43.34	\$55.17	\$33.15	\$32.20	\$6.2	
CD9 CODE	773	Anomalies of ear causing impairment of noting						10.0	
APG#	1/3	Disorders of external ear - infective otitis externa, unspecified	\$41.23	\$38.42	\$17.61	\$24.74	\$23.24	\$5.0	
CD9 CODE	380.10	Nonsuppurative otitis media and Eustachian tube disorder - acute serous otitis media	\$44.68	\$38.95	\$20.98	\$27.29	\$26.82	\$9.4	
CD9 CODE	381.01	Suppurative and unspecified otitis media - unspecified otitis media	\$32.62	\$25.16	\$21.14	\$21.91	\$22.64	\$9.7	
CD9 CODE	382.9	Acute upper respiratory infections of multiple or unspecified sites - unspecified	\$46.07	\$47.22	\$21.09	\$27.22	\$19.92	\$17.4	
ICD9 CODE									
APG#	783	PNEUMONIA	\$78.05	\$67.94	\$50.10	\$42.76	\$33.15	\$20.6	
ICD9 CODE	486	Pneumonia, organism unspecified RESPIRATORY DISEASE EXCEPT EMPHYSEMA, CHRONIC BRONCHITIS & ASTHMA							
APG#	784	RESPIRATORY DISEASE EXCEPT EMPHYSEMA, CHRONIC BROOKER AS A STANKE	\$90.90	\$87.82	\$46.97	\$51.62	\$38.02	\$37.3	
ICD9 CODE		Symptoms involving respiratory system and other chest symptoms - other	100.00						
APG#	785		\$124.17	\$141.53	\$42.09	\$109.24	\$107.71	\$57.0	
ICD9 CODE	493.90	Asthma - unspecified	\$37.64	\$23.34	\$25.75	\$34.75	\$29.05	\$26.7	
ICD9 CODE	496	Chronic airway obstruction, not elsewhere classified	407.04	TEGIO.	1				
APG#	796	CONGESTIVE HEART FAILURE & ISCHEMIC HEART DISEASE & HYPERTENSION	\$105.09	\$87.82	\$43.12	\$80.65	\$74.93	\$34.0	
ICD9 CODE	413.9	Angina pectoris - other and unspecified	\$85.10	\$87.27	\$26.65	\$80.44	\$79.82	\$31.1	
ICD9 CODE	414.9	Other forms of chronic ischemic heart disease - unspecified	\$111.65	\$97.20	\$48.16	\$65.71	\$59.49	\$38.3	
ICD9 CODE	428	Heart failure	\$111.05	957.20	\$40.10	400.71	100110	1.000	
APG#	797	HYPERTENSION		107.00	\$24,19	\$72.90	\$71.33	\$26.	
ICD9 CODE	401.9	Essential hypertension - unspecified	\$82.29	\$87.82	\$24.19	\$72.90	4/1.33	V20.	
APG#	800	CARDIOVASCULAR DISEASE EXCEPT CHF, ISCHEMIC HEART DISEASE & HYPERTENSION		100.07	105.57	\$75.12	\$59.49	\$36.0	
ICD9 CODE	414.0	Other forms of chronic ischemic heart disease - coronary atherosclerosis	\$86.15	\$87.27	\$25.57	9/5.12	905.45	730.	
APG#	811	NONINFECTIOUS GASTROENTERITIS		1		100.00	\$44.52	\$55.	
ICD9 CODE	558.9		\$102.33	\$88.25	\$65.14	\$59.78	\$44.52	900.	
	812	ULCERS, GASTRITIS & ESOPHAGITIS					101 70	\$50.	
APG#		Agute gastritis - unspecified gastritis and gastroduodentitis	\$77.03	\$76.97	\$36.82	\$53.10	\$31.73	\$50.	
ICD9 CODE	035.0	FUNCTIONAL GASTROINTESTINAL DISEASE & IRRITABLE BOWEL SYNDROME							
APG#		Constipation	\$46.49	\$43.63	\$20.74	\$33.78	\$31.04	\$17.	
ICD9 CODE		HEPATOBILIARY DISEASE						-	
APG#	814	O Cholelithiasis - calculus of gallbladder without mention of cholecystitis	\$104.17	\$87.82	\$76.67	\$49.77	\$47.54	\$27.	
ICD9 CODE	574.2	D Cholelithiasis - calculus of galibladder Without Heliton of Gholesystias  HEMORRHOIDS & OTHER ANAL-RECTAL DISEASES							
APG#	816	Other disorders of intestine - hemorrhage of rectum and anus	\$80.78	\$81.81	\$45.88	\$48.60	\$39.79	\$25.	
ICD9 CODE							1		
APG#	817	OTHER GASTROINTESTINAL DISEASES  Other symptoms involving abdomen and pelvis - abdominal pain	\$128.63	\$139.79	\$81.80	\$46.37	\$38.49	\$25.	
ICD9 CODE		Other symptoms involving abdomen and peivis - audominal pairi		-	1		-		

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## APPENDIX O

		MEAN, MEDIAN, & STANDARD DEVIATION FOR TOTAL INDIRECT COSTS - N	MEDICAL	PROCEL	UKES				
4				Hospitals		Phy	slcians' O	ffice	
MEDICAL					Standard			Standard	
PROCEDURES		APG & ICD-9 DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation	
CD9 CODE	1 V70.0	Routine general medical examination at a health care facility	\$83.15	\$73.15	\$41.30	\$61.48	\$59.85	\$16.57	
APG#	947	WELL CHILD CARE							
CD9 CODE	V20.2	Routine infant or child health check	\$58.34	\$60.57	\$34.93	\$39.56	\$37.52	\$17.61	
APG#	949	CONTRACEPTION & PROCREATIVE MANAGEMENT							
ICD9 CODE	V25.09	General counseling and advice; other (family planning advice)	\$52.85	\$44.57	\$18.17	\$26.57	\$21.32	\$12.46	
APG#	950	REPEAT PRESCRIPTION							
ICD9 CODE	V68.1	Issue of repeat prescriptions	\$23.11	\$22.10	\$11.85	\$26.09	\$25.72	\$10.94	
APG#	951	NONSPECIFIC SIGNS & SYMPTOMS & OTHER CONTACTS WITH HEALTH SERVICES							
ICD9 CODE	V67.0	Follow-up examination following surgery	\$39.24	\$41.82	\$15.52	\$32.68	\$34.25	\$14.99	
ICD9 CODE	V67.2	Follow-up examination following chemotherapy	\$69.99	\$75.32	\$30.45	\$56.15	\$37.75	\$45.89	
APG#	976								
ICD9 CODE	V22.2	Normal pregnancy; pregnant state, incidental	\$49.16	\$46.75	\$21.00	\$24.82	\$21.18	\$11.49	
		AGGREGATE MEAN FOR ALL MEDICAL PROCEDURES	\$72.09	\$64.29	\$37.44	\$48.21	\$42.47	\$24.79	

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				Hospitals		Phy	sicians' O	ffice
MEDIO AL					Standard			Standard
MEDICAL PROCEDURES		APG & ICD-9 DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
		HEAD & SPINE INJURY						
APG#	631	Intracranial injury of other an unspecified nature, with out mention of open intracranial wound	\$165.38	\$164.86	\$79.06	\$69.65	\$69,65	\$7.47
CD9 CODE			*100100	110110	7.10.10.1			1
APG#	634	OTHER INJURIES	\$19.10	\$19.10	\$6,00	\$60.32	\$60.32	\$2.47
CD9 CODE	897.0	Traumatic amputation of leg(s) (complete) (partial) unilateral, below knee/out mention of complication	\$19.10	\$19.10	96.00	\$60.3Z	\$00.3Z	72.47
APG#	646						100 11	\$2,50
ICD9 CODE	312.9	Undersocialized conduct disorder, aggressive type, unspecified disturbance of conduct	\$55.19	\$43.91	\$28.19	\$66.14	\$66.14	\$2.50
APG#	647							
ICD9 CODE	319.0	Unspecified mental retardation	\$60.99	\$44.21	\$32.78	\$31.94	\$31.94	\$23.09
APG#	650							
ICD9 CODE	V70.2	General psychiatric examination, requested by the authority	\$141.25	\$141.25	\$14.62	\$46.38	\$46.38	N.A.
APG#	663		1					
ICD9 CODE		Drug psychoses, drug withdrawal syndrome	\$156.08	\$141.25	\$105.44	\$37.83	\$46.49	\$16.56
APG#	676	NEONATE & CONGENITAL ANOMALY						
ICD9 CODE	760.0	Fetus or newborn affected by maternal condition which may be unrelated to present pregnancy, maternal	\$72.94	\$82.31	\$24.81	\$43.48	\$41.39	\$19.92
APG#		COUNSELING						
ICD9 CODE	V65.5	Person with feared complaint in whom no diagnosis was made	\$96.89	\$74.47	\$66.43	\$32.18	\$32.18	N.A.
	961	The state of the s	1					
APG# ICD9 CODE		Radiological examination, not elsewhere classified	\$43.94	\$43.94	\$30.44	\$31.65	\$20.86	\$28.88

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APG#

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			Hospi	itals			Physician	s' Office	
MEDICAL				Standard	-			Standard	
PROCEDURES	-	Mean	Median	Deviation	Count	Mean	Median	Deviation	Count
APG#	901								
ICD9 CODE	600	48.25	46.68	24.61	7	30.89	32.18	9.22	
APG#	902								
ICD9 CODE	601.9	54.55	54.74	18.58	10	26.5	23.99	9.51	10
APG#	916								
ICD9 CODE	V72.3	48.63	40	24.26	11	34.92	36.38	7.26	
APG#	932								
ICD9 CODE	043.9	80.74	56.71	52.19	7	93.86	91.18	64.2	
APG#	933							-	
ICD9 CODE	429	92.7	58.94	54.26	9	75.52	60.73	59.36	
ICD9 CODE	280.9	79.13	70.01	35.02	7	38.71	29.92	24.44	
ICD9 CODE	281.9	67.76	65.65	20.32	6	45.28	38.13	23.43	
ICD9 CODE	710.0	68.68	70.01	18.01	7	52.92	46.49	21.06	
APG#	946								
ICD9 CODE	V70.0	83.15	73.15	41.3	6	61.48	59.85	16.57	
APG#	947							47.04	
ICD9 CODE	V20.2	58.34	60.57	34.93	4	39.56	37.52	17.61	
APG#	948								
ICD9 CODE	V65.5	96.89	74.47	66.43	3	32.18	32.18	N.A.	
APG#	949							40.40	
ICD9 CODE	V25.09	52.85	44.57	18.17	5	26.57	21.32	12.46	
APG#	950								
ICD9 CODE	V68.1	23.11	22.1	11.85	7	26.09	25.72	10.94	
APG#	951			,				44.00	
ICD9 CODE	V67.0	39.24	41.82	15.52	8	32.68	34.25	14.99	
ICD9 CODE	V67.2	69.99	75.32	30.45	4	56.15	37.75	45.89	
APG#	961							20.00	
ICD9 CODE	V72.5	43.94	43.94	30.44	2	31.65	20.86	28.88	
APG#	976							44.40	
ICD9 CODE	V22.2	49.16	46.75	21	6	24.82	21.18	11.49	

		MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT LABOR COSTS - M	EDICAL	ROCED	UKES			
				Hospitals	5	Phy	sicians' (	
MEDICAL	-				Standard			Standard
PROCEDURES		APG & ICD-9 DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	601	HEMATOLOGICAL MALIGNANCY						
ICD9 CODE		Acute lymphoid leukemia	\$22.46	\$17.37	\$15.68	\$4.45	\$4.61	\$2.40
APG#	602	PROSTATIC MALIGNANCY						
ICD9 CODE	185	Malignant neoplasm prostate	\$13.87	\$10.60	\$8.99	\$8.57	\$6.17	\$7.35
APG#	603	LUNG MALIGNANCY						
ICD9 CODE		Malignant neoplasm of bronchus and lung unspecified	\$14.98	\$13.18	\$9.55	\$8.10	\$5.48	\$7.38
APG#	604	SKIN MALIGNANCY						
		Other malignant neoplasm of skin , site unspecified	\$16.95	\$14.55	\$13.46	\$6.07	\$5.41	\$3.06
APG#	605	MALIGNANCIES EXCEPT HEMATOLOGICAL, PROSTATIC, LUNG & SKIN						
		Malignant neoplasm of female breast, unspecified	\$15.01	\$13.79	\$10.44	\$4.55	\$3.53	\$3.41
ICD9 CODE	616	POISONING						
APG#		Toxic effect of other substances, venom	\$16.61	\$15.43	\$9.69	\$13.34	\$10.19	\$13.54
APG#	632	BURNS, & SKIN & SOFT TISSUE INJURY						
APG# ICD9 CODE	002.0	Open wound of finger(s) without mention of complication	\$5.30	\$4.75	\$4.80	\$8.29	\$6.25	\$6.31
	883.0	Attention to surgical dressings and sutures (change of dressing, removal of sutures)	\$5.15	\$2.71	\$5.40	\$6.06	\$3.59	\$6.79
ICD9 CODE		FRACTURE, DISLOCATION & SPRAIN						
APG#	633	Fracture of neck of femur unspecified, closed	\$7,40	\$7.91	\$4.61	\$10.27	\$5.73	\$9.53
ICD9 CODE	648	Fracture of neck of femuli unspecified, closed		-				
APG#	648	Senile and presenile organic psychotic conditions, senile dementia, uncomplicated	\$10.63	\$5.93	\$13.38	\$7.18	\$8.50	\$2.22
ICD9 CODE	649	Senie and presenie organic psychotic conditions, same demental, discomplication	-					
APG#		Neurotic disorders, anxiety states	\$6,46	\$5.64	\$5.64	\$8.22	\$9.19	\$4.90
ICD9 CODE	661	Neurotic disorders, anxiety states						
APG#		Nondependent abuse of drugs, other, mixed, of unspecified drug abuse	\$9.45	\$5.93	\$7.36	\$4.73	\$4.73	\$3.79
ICD9 CODE		Nondependent abuse of drugs, other, mixed, of drispectified drug doctor						
APG#	662	Alcohol dependence syndrome, other and unspecified alcohol dependence	\$9.58	\$5.64	\$9,39	\$5.75	\$4.49	\$4.62
ICD9 CODE		ROUTINE PRENATAL CARE						
APG#	691		\$9.31	\$9.31	\$5.65	\$4,05	\$3.14	\$3.42
ICD9 CODE		Supervision of other normal pregnancy	10101					
APG#	692	MATERNAL ANTEPARTUM COMPLICATION	\$2,70	\$3.02	\$1,32	\$7.55	\$7.19	\$6.07
ICD9 CODE		Early or threatened labor, threatened premature labor	12.70	10.00	7.1102	1	-	
APG#		ROUTINE POSTPARTUM COMPLICATION	\$10.19	\$8.85	\$6.97	\$4.11	\$2.38	\$4.51
ICD9 CODE		Routine postpartum follow-up		1	-			
APG#	694	MATERNAL POSTPARTUM COMPLICATION	\$6.17	\$6.17	\$3.79	\$6.36	\$3.56	\$6.64
ICD9 CODE		Other complications of pregnancy, not elsewhere classified, other specified complication of pregnancy	40.17	40117	10.110	10.00	10.22	
APG#	721	SYSTEMIC INFECTIOUS DISEASE	\$8.05	\$5.75	\$7.18	\$10.71	\$9.11	\$4.04
ICD9 CODE		Other unspecified infectious and parasitic diseases	10100	1000		1	-	1
APG#	722	Variation and undergoing	\$5.87	\$6.28	\$3,11	\$4.51	\$3.91	\$2.96
ICD9 CODE		Inflammatory disease of cervix, vagina, and vulva - Vaginitis and vulvovaginitis	40.07	TOILG	10111		14.4	1
APG#	736	TIA, CVA, & OTHER CEREBROVASCULAR EVENTS	\$10.48	\$10.54	\$8,70	\$6.55	\$4.79	\$6,18
ICD9 CODE		Acute, but ill-defined, cerebrovascular disease	V10.40	710.54	70.70	10.00	1	1.5111
APG#	737	HEADACHE	\$6.02	\$5.30	\$5.76	\$5.12	\$3.56	\$4.94
ICD9 CODE		Symptoms involving head and neck - headache	V0.02	45.55	40.70	10112	10100	1
APG#	738	CENTRAL NERVOUS SYSTEM DISEASES EXCEPT TIA, CVA, & HEADACHE	\$9.77	\$7.73	\$7.55	\$12.57	\$13.46	\$5.82
ICD9 CODE		General symptoms - convulsions	43.77	77.73	47.00	712.07	710.40	70.02
APG#	751	CATARACTS	\$15.02	\$15.93	\$7.55	\$11.24	\$11.46	\$3,92
ICD9 CODE		Cataract - senile cataract, unspecified	\$16.81	\$16.81	\$1.30		\$11.46	\$3.9
ICD9 CODE		Cataract - unspecified visual disturbance	710.01	V10.01	71.30	711.24	7.1.40	70.0
APG#		REFRACTION DISORDER	\$9.61	\$9.61	46.20	\$11.23	\$11 46	\$3.9
ICD9 CODE	367.9	Disorders of refraction and accommodation - unspecified disorder	\$9.61	1 99.01	90.39	1 411.23	1 411.40	43.5

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		MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT LABOR COS		Hospital	s	Phy	sicians' (	Office
MEDICAL					Standard			Standar
PROCEDURES		APG & ICD-9 DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
CD9 CODE	427 E	Cardiac dysrhythmias - cardiac arrest	\$5.86	\$4.71	\$5.10	\$19.93	\$9.59	\$29.2
APG#	841	BACK DISORDERS						
CD9 CODE		Other and unspecified disorders of back - lumbago	\$4.23	\$2.93	\$2.95	\$9.92	\$8.50	\$7.1
	842	MUSCULOSKELETAL DISEASES EXCEPT 8ACK DISORDERS						
APG#		Rheumatoid arthritis and other inflammatory polyarthropathies - rheumatoid arthritis	\$8,46	\$5.80	\$7.76	\$11.51	\$9.74	\$8.4
CD9 CODE	714.0	Osteoarthrosis and allied disorders - unspecified whether generalized or localized	\$7.29	\$5.47	\$6.82	\$10,40	\$9.51	\$6.9
ICD9 CODE		Other disorders of soft tissues - pain in limb	\$4.30	\$4.66	\$3.32	\$8.47	\$8.50	\$5.7
ICD9 CODE			7.1100		10101			
APG#		DISEASE OF NAILS	\$15.93	\$11.89	\$18.55	\$6.71	\$7.07	\$2.8
ICD9 CODE		Dermatophytosis - of nail	910.00	V11.03	V10.55	40.71	77107	72.0
APG#	857	CHRONIC SKIN ULCER	\$6.79	\$5.79	\$4.96	\$9.79	\$7.65	\$5.4
ICD9 CODE		Chronic ulcer of skin - ulcer of lower limbs, except decubitus	70.73	90.73	74.30	V3.73	47.00	7017
APG#	85B	CELLULITIS, IMPETIGO & LYMPHANGITIS	\$9.23	\$5.12	\$11.24	\$10.64	\$9.00	\$6.8
CD9 CODE		Other cellulitis and abscess - unspecified site	\$9.23	93.12	711.24	710.04	\$3.00	70.0
APG#	859	BREAST DISEASE	\$7.51	\$6.36	\$6.27	\$6.20	\$6,17	\$4.2
CD9 CODE		Other disorders of breast - signs and symptoms in breast - mastodynia	\$7.51	₹0.36	90.27	90.20	90.17	94.2
APG#	860	OTHER SKIN DISEASES	40.07	\$5.20	\$9.98	\$4.90	\$4.76	\$3.1
ICD9 CODE	217	Benign neoplasm of breast	\$9.37		\$11.48	\$7.96	\$8.05	\$4.2
ICD9 CODE		Contact dermatitis and other eczema - unspecified cause	\$7.37	\$3.90				
ICD9 CODE		Psoriasis and similar disorders - other psoriasis	\$5.46	\$2.93	\$6.99	\$6.25	\$6.73	\$3.4
ICD9 CODE	709.9	Other disorders of skin and subcutaneous tissue - unspecified	\$7.77	\$5.71	\$7.40	\$9.59	\$10.61	\$4.1
CD9 CODE	995.3	Certain adverse affects not elsewhere classified - allergy unspecified	\$8.90	\$7.79	\$7.91	\$12.18	\$11.67	\$7.7
APG#	871	DIABETES						
CD9 CODE	250.00	Diabetes mellitus - without mention of complication	\$5.07	\$5.09	\$3.39	\$7.88	\$6.03	\$7.9
APG#	872	OBESITY						
CD9 CODE	278.0	Obesity and other hyperalimentation - obesity	\$9.78	\$2.58	\$14.62	\$6.96	\$4.55	\$6.0
APG#	873	ENDOCRINE, NUTRITIONAL & METABOLIC DISEASE EXCEPT DIABETES & OBESITY						
ICD9 CODE	272	Disorders of lippid metabolism	\$10.87	\$3.82	\$12.12	\$7.58	\$5.89	\$7.1
APG#	886	URINARY TRACT INFECTION						
ICD9 CODE	599.0	Other disorders of urethra and urinary tract	\$4.29	\$3.42	\$3.36	\$6.70	\$6.90	\$2.9
APG#	887	BENAL FAILURE						
ICD9 CODE	585	Chronic renal failure	\$5.69	\$2.70	\$6.05	\$6.70	\$7.19	\$3.3
APG#	888	URINARY DISEASE EXCEPT URINARY TRACT INFECTION & RENAL FAILURE						
ICD9 CODE		Other disorders of urethra and urinary tract - hematuria	\$6.14	\$5.79	\$5.00	\$9.04	\$8.73	\$4.8
ICD9 CODE		Symptoms involving urinary tract - retention of urine	\$6.82	\$5.09	\$5.52	\$4.39	\$4.54	\$2.
APG#	901	8ENIGN PROSTATIC HYPERTROPHY						T .
ICD9 CODF	600	Hyperplasia of prostate	\$6.98	\$5.12	\$6.28	\$5.43	\$5.25	\$2.6
APG#	902	MALE REPRODUCTIVE DISEASES EXCEPT BENIGN PROSTATIC HYPERTROPHY						
		Inflammatory diseases of prostate - prostatitis unspecified	\$4.97	\$5.09	\$5.20	\$3.94	\$3.37	\$2.
APG#	916	FEMALE GYNECOLOGICAL DISEASE						
			\$4,12	\$3.87	\$2.81	\$5,29	\$5.34	\$2.
ICD9 CODE		Gynecological examination AIDS RELATED COMPLEX & HIV INFECTION WITH COMPLICATIONS	V-1112	10.01	12.01	1012	1	
APG#	932		\$7.58	\$10,18	\$4.80	\$14.03	\$13.58	\$8.
ICD9 CODE		Arc, unspecified OTHER IMMUNOLOGIC & HEMATOLOGIC DISEASE	47.00	7.0.10	700	1	7.2.30	1
APG#	933		\$6.76	\$8.46	\$4.70	\$11.24	\$9.82	\$8.
CD9 CODE	429	III-defined descriptions and complications of heart disease	\$12.44		\$14.38	\$7.23	\$4.94	
ICD9 CODE		Iron deficiency anemias - unspecified	\$10.15		\$8.98	\$8.76	\$7.41	\$5.
ICD9 CODE		Other deficiency anemias - unspecified	\$10.15		\$8.46	\$9.30	\$7.74	\$6.6
ICD9 CODE	710.0	Diffuse diseases of connective tissue - systemic lupus erythematosus ADULT MEDICAL EXAMINATION	₹8.70	90.45	90.40	95.30	97.74	40.0

		MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT LABOR COSTS -	MEDICAL					
-				Hospital	5	Ph	ysicians' (	Office
MEDICAL					Standard			Standard
PROCEDURES		APG & ICD-9 DESCRIPTION	Mean	Median	Deviation	Mean	Median	
CD9 CODE	V70.0	Routine general medical examination at a health care facility	\$15.26	\$5.80	\$16.96	\$9.04	\$8.34	\$6.21
APG#	947	WELL CHILD CARE						
CD9 CODE	V20.2	Routine infant or child health check	\$9.47	\$1.49	\$14.85	\$5.08	\$3.54	\$4.17
APG#	948	COUNSELING						
CD9 CODE	V65.5	Person with feared complaint in whom no diagnosis was made	\$5.79	\$3.79	\$4.20	\$4.79	\$4.79	N.A.
APG#	949	CONTRACEPTION & PROCREATIVE MANAGEMENT						
CD9 CODE	V25.09	General counseling and advice; other (family planning advice)	\$8.19	\$3.98	\$8.66	\$4.15	\$3.50	\$2.83
APG#	950	REPEAT PRESCRIPTION						
CD9 CODE	V68.1	Issue of repeat prescriptions	\$3.31	\$2.48	\$2.90	\$4.00	\$4.13	\$2.94
APG#	951	NONSPECIFIC SIGNS & SYMPTOMS & OTHER CONTACTS WITH HEALTH SERVICES			l			
CD9 CODE	V67.0	Follow-up examination following surgery	\$6.09	\$3.22	\$5.90	\$6.11	\$3.07	\$6.41
ICD9 CODE	V67.2	Follow-up examination following chemotherapy	\$12.15	\$10.93	\$11.20	\$10.46	\$8.09	\$8.16
APG#	961							
ICD9 CODE	V72.5	Radiological examination, not elsewhere classified	\$3.16	\$3.16	\$0.94	\$3.65	\$0.69	\$5.14
APG#	976							
ICD9 CODE	V22.2	Normal pregnancy; pregnant state, incidental	\$6.73	\$6.28	\$3.70	\$3.48	\$3.54	\$2.61
		AGGREGATE MEAN FOR ALL MEDICAL PROCEDURES	\$8.63	\$6.67	\$7.45	\$8.05	\$6.84	\$6.01

				Hospitals		Ph	ysicians' O	ffice
MEDICAL					Standard			Standard
PROCEDURES		APG & ICD-9 DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	631	HEAD & SPINE INJURY						
CD9 CODE	854.00	Intragranial injury of other an unspecified nature, with out mention of open intragranial wound	\$14.25	\$15.58	\$9.91	\$11.53	\$11.53	\$2.74
APG#		OTHER INJURIES						
CD9 CODE	897.0	Traumatic amputation of leg(s) (complete) (partial) unilateral, below knee/out mention of complication	\$4.42	\$4.42	\$1.24	\$15.08	\$15.08	\$5.65
APG#	646							
CD9 CODE	312.9	Undersocialized conduct disorder, aggressive type, unspecified disturbance of conduct	\$2.69	\$2.82	\$2.46	\$8.47	\$8.47	\$1.59
APG#	647							
CD9 CODE	319.0	Unspecified mental retardation	\$15.24	\$15.24	\$16.07	\$4.66	\$4.66	\$3.58
APG#	650							
CD9 CODE	V70.2	General psychiatric examination, requested by the authority	\$4.28	\$4.28	\$4.74	N.A.	N.A.	N.A.
APG#	663							
CD9 CODE	292.0	Drug psychoses, drug withdrawal syndrome	\$5.81	\$5.22	\$4.93	\$6.81	\$7.19	\$3.27
APG#	676	NEONATE & CONGENITAL ANOMALY						
CD9 CODE	760.0	Fetus or newborn affected by maternal condition which may be unrelated to present pregnancy, maternal	\$9.20	\$4.98	\$11.45	\$6.67	\$7.40	\$3.34

	MEDIAN, &	STANDAND	Hospi				Physician		
			Hospi	Standard			Physician	Standard	
MEDICAL						Mean	Median	Deviation	Count
ROCEDURES		Mean	Median	Deviation	Count	iviean	Median	Deviation	Couri
APG#	601					-		10.10	
CD9 CODE	204.0	\$22.46	\$17.37	\$15.68	4	\$4.45	\$4.61	\$2.40	- 6
APG#	602								
CD9 CODE	185	\$13.87	\$10.60	\$8.99	5	\$8.57	\$6.17	\$7.35	8
APG#	603								
CD9 CODE	162.9	\$14.98	\$13.18	\$9.55	7	\$8.10	\$5.48	\$7.38	6
APG#	604								
CD9 CODE	173.9	\$16.95	\$14.55	\$13.46	5	\$6.07	\$5.41	\$3.06	6
APG#	605								
CD9 CODE	174.9	\$15.01	\$13.79	\$10.44	7	\$4.55	\$3.53	\$3.41	- 8
APG#	616								
CD9 CODE	989.5	\$16.61	\$15.43	\$9.69	5	\$13.34	\$10.19	\$13.54	4
APG#	631								
CD9 CODE	854.00	\$14.25	\$15.58	\$9.91	4	\$11.53	\$11.53	\$2.74	2
APG#	632								
CD9 CODE	883.0	\$5.30	\$4.75	\$4.80	8	\$8.29	\$6.25	\$6.31	8
CD9 CODE	V58.3	\$5.15	\$2.71	\$5,40	15	\$6.06	\$3.59	\$6.79	7
APG#	633	40.10	VE.17.						
ICD9 CODE	820.8	\$7.40	\$7.91	\$4.61	6	\$10.27	\$5.73	\$9.53	8
	634	97.40	47.31	V4.01		V.0.27	70	-	
APG#	897.0	\$4.42	\$4,42	\$1.24	2	\$15.08	\$15.08	\$5.65	2
ICD9 CODE	646	94.42	74.42	V1.24		+10.00	7.0.00		
APG#	312.9	\$2.69	\$2.82	\$2,46	3	\$8.47	\$8,47	\$1.59	2
ICD9 CODE		\$2.03	92.02	72.40		VO.47	70.77	- 11100	
APG#	647		145.04	\$16.07	3	\$4,66	\$4.66	\$3,58	2
ICD9 CODE	319.0	\$15.24	\$15.24	\$16.07		\$4,00	94.00	43.00	
APG#	648			\$13.38	7	\$7.18	\$8.50	\$2.22	5
ICD9 CODE	290.0	\$10.63	\$5.93	\$13.38		\$7.18	\$8.50	92.22	
APG#	649					40.00	40.10	\$4.90	8
ICD9 CODE	300.0	\$6.46	\$5.64	\$5.64	7	\$8.22	\$9.19	\$4.90	- 0
APG#	650								
ICD9 CODE	V70.2	\$4.28	\$4.28	\$4.74	2	N.A.	N.A.	N.A.	1
APG#	661								
ICD9 CODE	305.90	\$9.45	\$5.93	\$7.36	7	\$4.73	\$4.73	\$3.79	2
APG#	662								
ICD9 CODE	303.90	\$9.58	\$5.64	\$9.39	5	\$5.79	\$4.49	\$4.62	5
APG#	663								
ICD9 CODE	292.0	\$5.81	\$5.22	\$4.93	4	\$6.81	\$7.19	\$3.27	3
APG#	676								
ICD9 CODE	760.0	\$9.20	\$4.98	\$11.45	3	\$6.67	\$7.40	\$3.34	3
APG#	691								
CD9 CODE	V22.1	\$9.31	\$9.31	\$5.65	3	\$4.05	\$3.14	\$3.42	6
APG#	692								
CD9 CODE	644.13	\$2.70	\$3.02	\$1.32	4	\$7.55	\$7.19	\$6.07	5
APG#	693	72.70	10.02						
ICD9 CODE	V24.2	10.19	8.85	6.97		4.11	2.38	4.51	
APG#	694	10.13	0.00	5.57		1			
	646.80	6.17	6.17	3.79		2 6.36	3.56	6,64	
CD9 CODE APG#	721	0.17	0.17	, 5.75		0.00	0.00	2.04	

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			Hosp	itals			Physician	s' Office	
MEDICAL				Standard				Standard	
PROCEDURES		Mean	Median	Deviation	Count	Mean	Median	Deviation	Count
APG#	901								
ICD9 CODE	600	6.98	5.12	6.28	7	5.43	5.25	2.66	
APG#	902								
ICD9 CODE	601.9	4.97	5.09	5.2	10	3.94	3.37	2.11	1
APG#	916								
ICD9 CODE	V72.3	4.12	3.87	2.81	11	5.29	5.34	2.74	
APG#	932								
ICD9 CODE	043.9	7.58	10.18	4.8	7	14.03	13.58	8.72	
APG#	933				-				
ICD9 CODE	429	6.76	8.46	4.7	9	11.24	9.82	8.58	
ICD9 CODE	280.9	12.44	6.75	14.38	7	7.23	4.94	5.77	
ICD9 CODE	281.9	10.15	7.73	8.98	6	8.76	7.41	5.55	
ICD9 CODE	710.0	8.7	5.45	8.46	7	9.3	7.74	6.65	
APG#	946								
ICD9 CODE	V70.0	15.26	5.8	16.96	6	9.04	8.34	6.21	
APG#	947								
ICD9 CODE	V20.2	9.47	1.49	14.85	4	5.08	3.54	4.17	
APG#	948								
ICD9 CODE	V65.5	5.79	3.79	4.2	3	4.79	4.79	N.A.	
APG#	949								
ICD9 CODE	V25.09	8.19	3.98	8.66	5	4.15	3.5	2.83	
APG#	950								
ICD9 CODE	V68.1	3.31	2.48	2.9	7	4	4.13	2.94	
APG#	951			,					
ICD9 CODE	V67.0	6.09	3.22	5.9	8	6.11	3.07	6.41	
ICD9 CODE	V67.2	12.15	10.93	11.2	4	10.46	8.09	8.16	
APG#	961								
ICD9 CODE	V72.5	3.16	3.16	0.94	2	3.65	0.69	5.14	
APG#	976								
ICD9 CODE	V22.2	6.73	6.28	3.7	6	3.48	3.54	2.61	

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MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT EQUIPMENT COSTS - MEDICAL PROCEDURES Physicians' Office Hospitals Standard Standard MEDICAL Deviation Median Deviation Mean Median Mean APG & ICD-9 DESCRIPTION PROCEDURES \$22.80 \$51.30 \$45.60 \$13.96 \$30.88 \$18.22 427.5 Cardiac dysrhythmias - cardiac arrest ICD9 CODE 841 BACK DISORDERS \$30.40 \$17.10 \$27.69 \$22.80 \$15.31 ICD9 CODE 724.2 Other and unspecified disorders of back - lumbago 842 MUSCULOSKELETAL DISEASES EXCEPT BACK DISORDERS APG# \$34.20 \$31.92 \$32.30 714.0 Rheumatoid arthritis and other inflammatory polyarthropathies - rheumatoid arthritis \$33.73 ICD9 CODE \$17.90 \$31.67 \$30.40 \$14.34 715.90 Osteoarthrosis and allied disorders - unspecified whether generalized or localized \$31.24 \$22.80 ICD9 CODE \$11.77 \$37.16 \$34.20 \$23.56 \$26.60 \$22.80 729.5 Other disorders of soft tissues - pain in limb ICD9 CODE DISEASE OF NAILS \$22.80 \$22.80 \$15.20 \$16.34 \$22.04 110 1 Dermatophytosis - of pail CHRONIC SKIN ULCER 857 APG# \$34.20 \$18.60 \$29.13 526 60 \$4.60 \$35.04 ICD9 CODE 707 1 Chronic ulcer of skin - ulcer of lower limbs, except decubitus CELLULITIS, IMPETIGO & LYMPHANGITIS APG# \$13.94 \$30.87 \$32.30 \$7.98 \$35.58 \$34.20 Other cellulitis and abscess - unspecified site ICD9 CODE 682.9 BREAST DISEASE APG# 859 \$18.24 \$7.31 611.71 Other disorders of breast - signs and symptoms in breast - mastodynia \$22.26 \$22.80 \$4.82 \$19.00 ICD9 CODE 860 OTHER SKIN DISEASES 817 48 \$1.96 \$23.34 \$19.00 \$12.30 Renign neoplasm of breast ICD9 CODE \$4.82 \$27.87 \$26.60 \$28.50 \$26.60 692.9 Contact dermatitis and other eczema - unspecified cause ICD9 CODE \$22.80 \$22.80 \$0.00 \$24.70 \$22.80 \$8.91 ICD9 CODE 696.1 Psoriasis and similar disorders - other osoriasis \$4.31 \$31.24 \$34.20 \$8.23 \$32.57 \$34.20 709.9 Other disorders of skin and subcutaneous tissue - unspecified ICD9 CODE \$53.20 \$18.53 \$52.36 \$53.20 \$19.91 \$47.71 995.3 Certain adverse affects not elsewhere classified - allergy unspecified ICD9 CODE DIABETES APGE \$19.00 \$18.68 \$38.00 \$45.60 \$29.98 250.00 Diabetes mellitus - without mention of complication APG# 872 OBESITY \$7.28 \$26,12 \$19.00 \$21.54 526 60 \$19.00 278.0 Obesity and other hyperalimentation - obesity ICD9 CODE ENDOCRINE, NUTRITIONAL & METABOLIC DISEASE EXCEPT DIABETES & OBESITY \$15.20 \$26.60 \$10.68 \$26.18 \$26.15 \$26.60 ICD9 CODE Disorders of lippid metabolism LIBINARY TRACT INFECTION APG# \$29 OA \$22.80 \$10.60 \$23.49 \$22.80 599.0 Other disorders of urethra and urinary tract ICD9 CODE 887 RENAL FAILURE \$22.80 \$20 OR \$34.20 \$38.00 \$14.55 Chronic renal failure ICD9 CODE 585 URINARY DISEASE EXCEPT URINARY TRACT INFECTION & RENAL FAILURE APG# \$29.17 \$34 55 \$34.20 \$9.22 \$47 94 \$34.20 Other disorders of urethra and urinary tract - hematuria ICD9 CODE 599.7 \$40.38 \$32.30 \$18.72 \$21.96 \$22.80 \$5.63 Symptoms involving urinary tract - retention of urine ICD9 CODE 788.2 BENIGN PROSTATIC HYPERTROPHY APG# 901 \$5.37 \$23.34 \$19.00 \$11.28 \$19.00 \$19.00 Hyperplasia of prostate ICD9 CODE MALE REPRODUCTIVE DISEASES EXCEPT BENIGN PROSTATIC HYPERTROPHY 902 \$13.02 \$16.72 \$6.75 \$31,16 \$30.40 Inflammatory diseases of prostate - prostatitis unspecified ICD9 CODE 601.9 FEMALE GYNECOLOGICAL DISEASE APGE 916 \$26.60 \$22.26 \$21.85 \$22.80 \$6.01 \$31.16 V72.3 Gynecological examination CD9 CODE AIDS RELATED COMPLEX & HIV INFECTION WITH COMPLICATIONS \$36.73 \$34.20 \$46.69 \$30.40 \$32.67 CD9 CODE 043.9 Arc unspecified OTHER IMMUNOLOGIC & HEMATOLOGIC DISEASE \$41.76 526 60 \$26.60 \$16.85 \$58.69 \$53.20 III-defined descriptions and complications of heart disease ICD9 CODE \$38.54 \$34.20 \$10.16 \$15.20 280.9 Iron deficiency anemias - unspecified ICD9 CODE \$39.90 \$14.77 \$22.80 \$16.94 \$36.10 281.9 Other deficiency anemias - unspecified ICD9 CODE \$15.34 \$14.46 \$35.61 \$30.40 710.0 Diffuse diseases of connective tissue - systemic lupus erythematosus \$37.46 \$34.20 ICD9 CODE 946 ADULT MEDICAL EXAMINATION

## APPENDIX O

		MEAN, MEDIAN, & STANDARD DEVIATION FOR INDIRECT EQUIPMENT COSTS	- MEDIC	AL PRO	EDURES			
		many, may, or,		Hospitals		Phy	rsiclans' Of	fice
					Standard			Standar
MEDICAL	-	APG & ICD-9 DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviatio
PROCEDURES		Routine general medical examination at a health care facility	\$42.43	\$39.90	\$16.72	\$38.00	\$45.60	\$9.8
ICD9 CODE								
APG#	947	WELL CHILD CARE	\$32.30	\$28.50	\$21.16	\$23.43	\$22.80	\$8.1
CD9 CODE		Routine infant or child health check	932.30	V20.00	421110		1444	
APG#		CONTRACEPTION & PROCREATIVE MANAGEMENT			\$15.44	\$15.20	\$15.20	\$3.4
ICD9 CODE	V25.09	General counseling and advice; other (family planning advice)	\$30.40	\$22.80	\$15.44	\$15.20	\$15.20	93.4
APG#	950	REPEAT PRESCRIPTION					\$17.10	\$5.7
ICD9 CODE	V68.1	Issue of repeat prescriptions	\$12.16	\$11.40	\$5.65	\$17.10	\$17.10	90.7
APG#	951	NONSPECIFIC SIGNS & SYMPTOMS & OTHER CONTACTS WITH HEALTH SERVICES					440.00	\$9.3
ICD9 CODE		Follow-up examination following surgery	\$19.00	\$20.90	\$5.37	\$20.90	\$19.00	
ICD9 CODE		Follow-up examination following chemotherapy	\$32.30	\$30.40	\$9.56	\$26.60	\$20.90	\$12.7
	976	T OTOW OF CAUTIMETER THE THE THE THE THE THE THE THE THE THE						
APG#		and the state incidental	\$26.60	\$22.80	\$14.01	\$14.44	\$15.20	\$5.6
ICD9 CODE	V22.2	Normal pregnancy; pregnant state, incidental						
	-	AGGREGATE MEAN FOR ALL MEDICAL PROCEDURES	\$39.17	\$35.42	\$20.36	\$27.50	\$25.69	\$11.4

				Hospitals		Phy	ysicians' O	ffice
MEDICAL					Standard			Standard
PROCEDURES		APG & ICD-9 DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviatio
APG#	631	HEAD & SPINE INJURY						1
CD9 CODE	854.00	Intracranial injury of other an unspecified nature, with out mention of open intracranial wound	\$105.45	\$125.40	\$48.70	\$45.60	\$45.60	\$0.00
APG#		OTHER INJURIES						
ICD9 CODE	897.0	Traumatic amputation of leg(s) (complete) (partial) unilateral, below knee/out mention of complication	\$9.50	\$9.50	\$2.69	\$28.50	\$28.50	\$8.06
APG#	646							
ICD9 CODE	312.9	Undersocialized conduct disorder, aggressive type, unspecified disturbance of conduct	\$34.20	\$34.20	\$11.40	\$45.60	\$45.60	\$0.00
APG#	647							
ICD9 CODE	319.0	Unspecified mental retardation	\$22.80	\$22.80	\$0.00	\$22.80	\$22.80	\$16.12
APG#	650							
ICD9 CODE	V70.2	General psychiatric examination, requested by the authority	\$102.60	\$102.60	\$48.37	\$45.60	\$45.60	N.A.
APG#	663						100 10	440.00
ICD9 CODE	292.0	Drug psychoses, drug withdrawal syndrome	\$102.60	\$102.60	\$70.89	\$25.33	\$30.40	\$12.22
APG#		NEONATE & CONGENITAL ANOMALY					1.5.00	440.55
ICD9 CODE	760.0	Fetus or newborn affected by maternal condition which may be unrelated to present pregnancy, maternal	\$49.40	\$38.00	\$37.43	\$25.33	\$15.20	\$17.55
APG#	948	COUNSELING			11000		100.00	
ICD9 CODE	V65.5	Person with feared complaint in whom no diagnosis was made	\$38.00	\$45.60	\$13.16	\$22.80	\$22.80	N.A.
APG#	961				110.00	100.00	115.00	400.44
ICD9 CODE	V72.5	Radiological examination, not elsewhere classified	\$26.60	\$26.60	\$10.75	\$22.80	\$15.20	\$20.11

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			Hos	pitals			Physicia	ns' Office	
MEDICAL				Standard				Standard	
PROCEDURES		Mean	Median	Deviation	Count	Mean	Median	Deviation	Count
APG#	901								
CD9 CODE	600	\$23.34	\$19.00	\$11.28	7	\$19.00	\$19.00	\$5.37	7
APG#	902							1	
CD9 CODE	601.9	\$31.16	\$30.40	\$13.02	10	\$16.72	\$15.20	\$6.75	10
APG#	916								
CD9 CODE	V72.3	\$31.16	\$26.60	\$22.26	11	\$21.85	\$22.80	\$6.01	8
APG#	932								
CD9 CODE	043.9	\$46.69	\$30.40	\$32.67	7	\$36.73	\$34.20	\$26.69	3
APG#	933								
CD9 CODE	429	\$58.69	\$53.20	\$41.76	9	\$28.50	\$26.60	\$16.85	4
CD9 CODE	280.9	\$38.54	\$34.20	\$10.16	7	\$23.89	\$15.20	\$17.51	7
CD9 CODE	281.9	\$36.10	\$39.90	\$14.77	6	\$27.87	\$22.80	\$16.94	6
CD9 CODE	710.0	\$37.46	\$34.20	\$14.46	7	\$35.61	\$30.40	\$15.34	7
APG#	946								
CD9 CODE	V70.0	\$42.43	\$39.90	\$16.72	6	\$38.00	\$45.60	\$9.81	7
APG#	947								
CD9 CODE	V20.2	\$32.30	\$28.50	\$21.16	4	\$23.43	\$22.80	\$8.12	6
APG#	948								
CD9 CODE	V65.5	\$38.00	\$45.60	\$13.16	3	\$22.80	\$22.80	N.A.	11
APG#	949					1			
CD9 CODE	V25.09	\$30.40	\$22.80	\$15.44	5	\$15.20	\$15.20	\$3.40	6
APG#	950								
CD9 CODE	V68.1	\$12.16	\$11.40	\$5.65	7	\$17.10	\$17.10	\$5.76	6
APG#	951			,					
CD9 CODE	V67.0	\$19.00	\$20.90	\$5.37	88	\$20.90	\$19.00	\$9.31	8
CD9 CODE	V67.2	\$32.30	\$30.40	\$9.56	4	\$26.60	\$20.90	\$12.79	4
APG#	961								
CD9 CODE	V72.5	\$26.60	\$26.60	\$10.75	2	\$22.80	\$15.20	\$20.11	3
APG#	976								
CD9 CODE	V22.2	\$26.60	\$22.80	\$14.01	6	\$14.44	\$15.20	\$5.64	5

		MEAN, MEDIAN, & STANDARD DEVIATION FOR OVERHEAD COSTS - MED		Hospitals		Phy	slcians' C	Office
MEDICAL	-				Standard			Standard
ROCEDURES		APG & ICD-9 DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviatio
APG#	601	HEMATOLOGICAL MALIGNANCY						
CD9 CODE		Acute lymphoid leukemia	\$56.85	\$63.83	\$20.76	\$6.73	\$4.99	\$5.22
APG#	602	PROSTATIC MALIGNANCY						
CD9 CODE	185	Malignant neoplasm prostate	\$35.61	\$27.62	\$25.51	\$12.70	\$12.48	\$8.75
APG#	603	LUNG MALIGNANCY						
CD9 CODE	162.9	Malignant neoplasm of bronchus and lung unspecified	\$40.74	\$30.98	\$21.43	\$16.70	\$10.23	\$20.37
APG#	604	SKIN MALIGNANCY						
	173.9	Other malignant neoplasm of skin , site unspecified	\$26.34	\$17.71	\$22.41	\$10.21	\$7.50	\$9.38
CD9 CODE APG#	605	MALIGNANCIES EXCEPT HEMATOLOGICAL, PROSTATIC, LUNG & SKIN						
		Malignant neoplasm of female breast, unspecified	\$33.11	\$26.56	\$25.58	\$8.51	\$3.75	\$9.94
CD9 CODE APG#	616	POISONING						
		Toxic effect of other substances, venom	\$106.61	\$57.59	\$147.46	\$21.04	\$23.06	\$9.85
CD9 CODE	632	BURNS, & SKIN & SOFT TISSUE INJURY						
CD9 CODE	883 0	Open wound of finger(s) without mention of complication	\$18.64	\$13.27	\$19.07	\$8.70	\$4.43	\$10.73
CD9 CODE	VEQ 2	Attention to surgical dressings and sutures (change of dressing, removal of sutures)	\$17.21	\$11.47	\$22.02	\$6.75	\$4.18	\$6.29
APG#	633	FRACTURE, DISLOCATION & SPRAIN						
CD9 CODE	820.8	Fracture of neck of femur unspecified, closed	\$34.70	\$27.53	\$26.83	\$16.77	\$5.88	\$18.38
APG#	648	Fracture of fleck of femal disposition, seems						
CD9 CODE	290.0	Senile and presenile organic psychotic conditions, senile dementia, uncomplicated	\$36.28	\$27.44	\$27.81	\$11.37	\$8.32	\$7.91
APG#	649	Serine and presente organic payereste contantons, contantons,						
		Neurotic disorders, anxiety states	\$31.11	\$15.69	\$30.09	\$13.17	\$7.89	\$11.43
CD9 CODE	661	Neurotic disorders, anxiety states						
CD9 CODE		Nondependent abuse of drugs, other, mixed, of unspecified drug abuse	\$49.40	\$36.96	\$31.08	\$4.49	\$4.49	\$0.24
	662	Notice period in abuse of drugs, other, mixed, or drugsoned and		1				
APG#		Alcohol dependence syndrome, other and unspecified alcohol dependence	\$55.27	\$36.58	\$49.19	\$11.35	\$6.48	\$12.08
CD9 CODE	691	ROUTINE PRENATAL CARE						
APG#		Supervision of other normal pregnancy	\$13.91	\$11.47	\$9.79	\$8.97	\$5.91	\$8.51
CD9 CODE	692	MATERNAL ANTEPARTUM COMPLICATION						
APG#		Early or threatened labor, threatened premature labor	\$5.60	\$2.32	\$8.21	\$15.77	\$8.07	\$15.48
CD9 CODE	693	ROUTINE POSTPARTUM COMPLICATION						
APG#		Routine postpartum follow-up	\$15.22	\$13.24	\$13.43	\$9.60	\$4.56	\$11.68
ICD9 CODE	694	MATERNAL POSTPARTUM COMPLICATION						
APG#	040.00	Other complications of pregnancy, not elsewhere classified, other specified complication of pregnancy	\$5.28	\$5.28	\$5,66	\$14.33	\$7.55	\$16.72
ICD9 CODE		SYSTEMIC INFECTIOUS DISEASE	10					
APG#	721	Other unspecified infectious and parasitic diseases	\$22.46	\$17.69	\$17.23	\$15.99	\$7.75	\$17.53
CD9 CODE		Other unspectified infectious and parasitic diseases	1881.0	1111111				
APG#	722	Inflammatory disease of cervix, vagina, and vulva - Vaginitis and vulvovaginitis	\$21.90	\$17.37	\$19.90	\$6,44	\$4.56	\$6.23
ICD9 CODE		TIA, CVA, & OTHER CEREBROVASCULAR EVENTS	721.00	417107	1.0.00		1	
APG#	736		\$36.56	\$26.31	\$34.23	\$11.53	\$7.22	\$13.00
ICD9 CODE		Acute, but ill-defined, cerebrovascular disease	700.00	100.0.	1		-	1
APG#	737	HEADACHE	\$20.65	\$17.37	\$13,48	\$9.73	\$5.28	\$12.5
ICD9 CODE		Symptoms involving head and neck - headache	720.00	417107		1011.0	1	
APG#	738	CENTRAL NERVOUS SYSTEM DISEASES EXCEPT TIA, CVA, & HEADACHE	\$32.17	\$34.74	\$19.36	\$19.25	\$9.31	\$17.7
ICD9 CODE		General symptoms - convulsions	V32.17	754.74	7.3.30	7.3.20		
APG#	751	CATARACTS	\$24.52	\$22.93	\$7.72	\$27.68	\$17.90	\$25.7
ICD9 CODE		Cataract - senile cataract, unspecified	\$23.34	\$19.92	\$8.40		\$17.90	\$25.77
ICD9 CODE	366.9	Cataract - unspecified visual disturbance	723.34	710.04	+00	727.00		120.77
APG#	752	REFRACTION DISORDER						

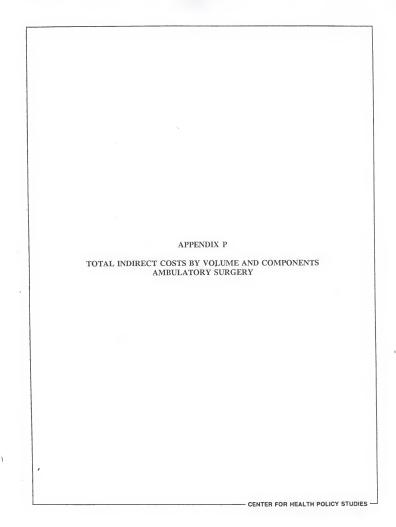
				Hospitals		Phy	sicians' (	Office
MEDICAL	-				Standard			Standar
PROCEDURES	-	APG & ICD-9 DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	753	CONJUNCTIVITIS & OTHER SIMPLE EXTERNAL EYE INFLAMMATION						
ICD9 CODE		Inflammation of eyelids - blepharitis	\$16.23	\$17.28	\$11.76	\$12.60	\$7.07	\$16.3
APG#	754	EYE DISEASE EXCEPT CATARACT, REFRACTION DISORDER & CONJUNCTIVITIS						
ICD9 CODE		Glaucoma - primary open angle glaucoma	\$24.99	\$20.06	\$12.70	\$16.95	\$10.39	\$12.1
ICD9 CODE		Glaucoma - unspecified	\$9.84	\$9.84	\$1.75	\$21.41	\$18.62	\$17.8
ICD9 CODE		Disorders of lacrimal system - other disorders - tear film insufficiency, unspecified	\$23.87	\$17.20	\$15.08	\$17.16	\$9.31	\$19.2
APG#	766	DENTAL DISEASE						
ICD9 CODE		Other after following surgery	\$12,31	\$7.70	\$14.47	\$6.95	\$4.08	\$6.7
APG#	769	ACUTE NONINFECTIOUS EAR, NOSE, & THROAT DISEASE						
ICD9 CODE		Symptoms involving head and neck - epistaxis	\$27.45	\$35.38	\$18.61	\$11.59	\$4.94	\$17.3
APG#	771	HEARING LOSS						
		Hearing loss - unspecified	\$28.09	\$11.69	\$28.24	\$7.27	\$4.38	\$6.64
APG#	772	OTHER EAR, NOSE, THROAT, & MOUTH DISEASES	180.00					
		Disorders of external ear - impacted cerumen	\$25.75	\$16.31	\$23.28	\$9.85	\$5.83	\$6.20
ICD9 CODE		Anomalies of ear causing impairment of hearing - unspecified anomaly of ear with impairment of hearin	\$29.05	\$15.24	\$30.09	\$8.74	\$6,16	\$6.86
ICD9 CODE	773	Anomalies of ear causing impairment of nearing vorspective anomaly of ear war impairment of nearing	420.00	410124	700.00	10111	10110	70.00
APG#		Disorders of external ear - infective otitis externa, unspecified	\$14.02	\$15.91	\$9,20	\$5.77	\$4.59	\$3.67
ICD9 CODE		Nonsuppurative offits media and Eustachian tube disorder - acute serous offits media	\$15.05	\$15.91	\$10.82	\$7,11	\$3.82	\$4.89
ICD9 CODE	381.01	Suppurative and unspecified otitis media - unspecified otitis media	\$10.22	\$7.46	\$10.45	\$5.24	\$3,17	\$4,19
ICD9 CODE			\$13.56	\$13.69	\$9.19	\$7.10	\$3.50	\$6.66
ICD9 CODE		Acute upper respiratory infections of multiple or unspecified sites - unspecified	\$13.00	V13.03	95.15	47.10	V3.30	
APG#	783	PNEUMONIA	\$25.07	\$20.19	\$22.74	\$9.44	\$7.46	\$6.95
ICD9 CODE	486	Pneumonia, organism unspecified RESPIRATORY DISEASE EXCEPT EMPHYSEMA, CHRONIC BRONCHITIS & ASTHMA	\$20.07	920.13	422.74	73.44	¥7.40	70.55
APG#	784		\$29.25	\$26.56	\$22.24	\$16.62	\$8.59	\$19.9
ICD9 CODE		Symptoms involving respiratory system and other chest symptoms - other	725.20	920.00	V22.24	V10.02	VO.00	V10.0
APG#	785		\$40.57	\$45.92	\$23.72	\$30.59	\$21.43	\$30.6
ICD9 CODE		Asthma - unspecified	\$16.42	\$8.85	\$14.84	\$5.30	\$3.96	\$3.60
ICD9 CODE	496	Chronic airway obstruction, not elsewhere classified	\$10.42	90.00	914.04	95.50	93.30	43.00
APG#	796	CONGESTIVE HEART FAILURE & ISCHEMIC HEART DISEASE & HYPERTENSION	\$30.28	\$34.40	\$16.64	\$23.73	\$13.89	\$22.0
ICD9 CODE		Angina pectoris - other and unspecified	\$27.06	\$34.40	\$12.93	\$23.60	\$14.88	\$20.3
ICD9 CODE	414.9		\$35.22	\$35.49	\$23.25	\$18.21	\$12.24	
ICD9 CODE	428	Heart failure	\$35.22	\$35.49	\$23.25	910.21	912.24	913.0
APG#	797	HYPERTENSION	107.44	\$34,40	\$13.33	\$19.45	\$13.48	\$16.3
ICD9 CODE		Essential hypertension - unspecified	\$27.11	\$34.40	\$13.33	\$19.45	\$13.48	\$16.3
APG#	800	CARDIOVASCULAR DISEASE EXCEPT CHF, ISCHEMIC HEART DISEASE & HYPERTENSION	407.40	404.00	440.04	\$21.70	\$12.24	\$22.4
ICD9 CODE		Other forms of chronic ischemic heart disease - coronary atherosclerosis	\$27.48	\$31.92	\$12.84	\$21.70	\$12.24	\$22.4
APG#	811	NONINFECTIOUS GASTROENTERITIS		100.00	100.00	101.05	\$11.71	\$28.8
ICD9 CODE		Other noninfectious gastroenteritis and colitis - other and unspecified	\$37.39	\$32.02	\$39.23	\$21.35	\$11.71	\$28.8
APG#	812	ULCERS, GASTRITIS & ESOPHAGITIS				1.77.00	17.10	1004
ICD9 CODE	535.5	Acute gastritis - unspecified gastritis and gastroduodentitis	\$25.15	\$30.02	\$14.75	\$17.26	\$7.46	\$26.1
APG#	813	FUNCTIONAL GASTROINTESTINAL DISEASE & IRRITABLE BOWEL SYNDROME						1
ICD9 CODE		Constipation	\$14.41	\$15.69	\$10.89	\$7.56	\$6.69	\$9.16
APG#	814	HEPATOBILIARY DISEASE						1
ICD9 CODE		Cholelithiasis - calculus of gallbladder without mention of cholecystitis	\$35.78	\$31.39	\$34.67	\$13.46	\$7.06	\$12.5
APG#	816	HEMORRHOIDS & OTHER ANAL-RECTAL DISEASES						1
ICD9 CODE	569.3	Other disorders of intestine - hemorrhage of rectum and anus	\$24.44	\$24.47	\$19.95	\$13.84	\$7.70	\$13.3
APG#	817	OTHER GASTROINTESTINAL DISEASES						
ICD9 CODE	789.0	Other symptoms involving abdomen and pelvis - abdominal pain	\$45.08	\$32.52	\$46.37	\$10.62	\$7.46	\$9.10
APG#	827	MAJOR SIGNS, SYMPTOMS & FINDINGS						

		MEAN, MEDIAN, & STANDARD DEVIATION FOR OVERHEAD COSTS -	MEDICAL PR					
				Hospitals		Ph	ysicians' (	
MEDICAL					Standard			Standard
PROCEDURES		APG & ICD-9 DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
ICD9 CODE	427.5	Cardiac dysrhythmias - cardiac arrest	\$44.44	\$31.24	\$41.67	\$21.72	\$7.32	\$32.15
APG#	841	BACK DISORDERS						
ICD9 CODE		Other and unspecified disorders of back - lumbago	\$13.24	\$9.29	\$11.62	\$14.02	\$8.56	\$11.50
APG#	842	MUSCULOSKELETAL DISEASES EXCEPT BACK DISORDERS						1
ICD9 CODE	714.0	Rheumatoid arthritis and other inflammatory polyarthropathies - rheumatoid arthritis	\$21.72	\$23.12	\$15.34	\$13.83	\$9.18	\$16.52
ICD9 CODE	715.00	Osteoarthrosis and allied disorders - unspecified whether generalized or localized	\$21.79	\$17.69	\$16.90	\$13.50	\$6.09	\$17.80
ICD9 CODE		Other disorders of soft tissues - pain in limb	\$16.18	\$13.28	\$11.65	\$9.52	\$5.29	\$9.18
APG#	856	DISEASE OF NAILS						
ICD9 CODE		Dermatophytosis - of nail	\$23.61	\$11.69	\$29.88	\$6.65	\$6.05	\$3.56
APG#	857	CHRONIC SKIN ULCER						
ICD9 CODE	707.1	Chronic ulcer of skin - ulcer of lower limbs, except decubitus	\$23.28	\$26.31	\$16.97	\$7.09	\$6.21	\$2.28
APG#	858	CELLULITIS, IMPETIGO & LYMPHANGITIS						
ICD9 CODE		Other cellulitis and abscess - unspecified site	\$25.90	\$23.38	\$19.73	\$12.75	\$6.08	\$17.81
APG#	859	BREAST DISEASE						
ICD9 CODE		Other disorders of breast - signs and symptoms in breast - mastodynia	\$15.42	\$17.20	\$9.99	\$10.16	\$4.16	\$12.88
APG#	860	OTHER SKIN DISEASES						
ICD9 CODE	217	Senign neoplasm of breast	\$19.65	\$14.62	\$17.54	\$7.73	\$3.95	\$7.93
ICD9 CODE		Contact dermatitis and other eczema - unspecified cause	\$21.39	\$20.46	\$18.15	\$12.07	\$8.50	\$9.14
ICD9 CODE	696.1	Psoriasis and similar disorders - other psoriasis	\$15.66	\$17.37	\$11.08	\$9.20	\$7.13	\$7.55
	709.9	Other disorders of skin and subcutaneous tissue - unspecified	\$23.52	\$26.31	\$12.87	\$12.43	\$9.07	\$8.14
ICD9 CODE	995.3	Certain adverse affects not elsewhere classified - allergy unspecified	\$27.20	\$30.98	\$20.79	\$22.84	\$18.51	\$17.58
ICD9 CODE	871	DIABETES						
APG#		Diabetes mellitus - without mention of complication	\$22.80	\$22.98	\$13.26	\$9.68	\$10.40	\$5.35
ICD9 CODE		OBESITY						
APG#	872	Obesity and other hyperalimentation - obesity	\$18.13	\$11,58	\$21.53	\$8.52	\$7.48	\$5.79
ICD9 CODE	873	ENDOCRINE, NUTRITIONAL & METABOLIC DISEASE EXCEPT DIABETES & OBESITY				1		
APG#		Disorders of lipoid metabolism	\$22.04	\$21.88	\$16.81	\$8,68	\$7.51	\$6.51
ICD9 CODE	272	URINARY TRACT INFECTION		1				
APG#	886		\$19.14	\$17.37	\$19.04	\$10.53	\$6.29	\$8.59
ICD9 CODE		Other disorders of urethra and urinary tract	410.11	117101	1,10.0	1111111	1	
APG#	887	RENAL FAILURE	\$22.48	\$15.04	\$25.80	\$9.58	\$9.28	\$5.54
ICD9 CODE	585	Chronic renal failure URINARY DISEASE EXCEPT URINARY TRACT INFECTION & RENAL FAILURE	722,40	410101	120.00	1		
APG#	888		\$29.26	\$26.31	\$20.37	\$14.27	\$9.03	\$12.55
ICD9 CODE	599.7	Other disorders of urethra and urinary tract - hematuria	\$20.45	\$20.62	\$10.50	\$8.91	\$7.70	\$5,46
ICD9 CODE		Symptoms involving urinary tract - retention of urine	020.40	V20.02	¥10.00	10101		1
APG#	901	BENIGN PROSTATIC HYPERTROPHY	\$18.92	\$14.62	\$12.86	\$8,45	\$8.21	\$4.73
ICD9 COLE	600	Hyperplasia of prostate  MALE REPRODUCTIVE DISEASES EXCEPT BENIGN PROSTATIC HYPERTROPHY	V10.32	V14.02	V12.00	70.10	TOIL	
APG#	902		\$18.91	\$20.84	\$12.08	\$6.93	\$4,03	\$4.62
ICD9 CODE		Inflammatory diseases of prostate - prostatitis unspecified	\$10.51	720.04	V12.00	40.50	77.00	7.1102
APG#	916	FEMALE GYNECOLOGICAL DISEASE	\$14.09	\$11.97	\$10.38	\$7.78	\$6.30	\$4.98
ICD9 CODE		Gynecological examination	\$14.03	V11.37	410.00	+7.70	+5.50	1 4.50
APG#	932	AIDS RELATED COMPLEX & HIV INFECTION WITH COMPLICATIONS	\$28.64	\$23,38	\$23.71	\$43.09	\$14.09	\$51.18
ICD9 CODE		Arc, unspecified	720.04	720.00	V2.0.71	V-10.03	717.00	+010
APG#	933	OTHER IMMUNOLOGIC & HEMATOLOGIC DISEASE	\$28.76	\$23.38	\$22.69	1 435 78	\$16.71	\$44.83
ICD9 CODE	429	III-defined descriptions and complications of heart disease	\$29.92	\$26.31	\$23.06	\$7,60	\$7.51	\$4.44
ICD9 CODE		Iron deficiency anemias - unspecified	\$29.92	\$20.31	\$12.95	\$8,65	\$7.37	\$6.05
ICD9 CODE	281.9	Other deficiency anemias - unspecified	\$23.20	\$27.00	\$12.95	\$10.90	\$11.25	\$3.04
ICD9 CODE		Diffuse diseases of connective tissue - systemic lupus erythematosus :	\$23.77	\$20.31	913.35	¥10.90	911.25	73.04
APG#	946	ADULT MEDICAL EXAMINATION						

				Hospitals		Phy	sicians' C	Office
MEDICAL					Standard			Standard
PROCEDURES		APG & ICD-9 DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviatio
CD9 CODE	V70.0	Routine general medical examination at a health care facility	\$27.99	\$29.87	\$23.18	\$14.44	\$9.18	\$11.21
APG#	947	WELL CHILD CARE						
CD9 CODE	V20.2	Routine infant or child health check	\$18.94	\$13.18	\$23.59	\$11.06	\$6.97	\$9.64
APG#		CONTRACEPTION & PROCREATIVE MANAGEMENT						
CD9 CODE	V25.09	General counseling and advice; other (family planning advice)	\$14.27	\$11.15	\$16.65	\$7.21	\$4.02	\$8.09
APG#	950	REPEAT PRESCRIPTION						
ICD9 CODE		Issue of repeat prescriptions	\$7.64	\$6.64	\$7.36	\$5.00	\$4.31	\$3.90
APG#	951	NONSPECIFIC SIGNS & SYMPTOMS & OTHER CONTACTS WITH HEALTH SERVICES						
ICD9 CODE	V67.0	Follow-up examination following surgery	\$14.90	\$15.91	\$9.83	\$7.36	\$6.13	\$4.22
ICD9 CODE	V67.2	Follow-up examination following chemotherapy	\$25.54	\$26.39	\$21.39	\$19.08	\$8.76	\$25.21
APG#	976							
ICD9 CODE	V22.2	Normal pregnancy; pregnant state, incidental	\$15.84	\$12.76	\$12.54	\$6.90	\$4.97	\$6.89
		AGGREGATE MEAN FOR ALL MEDICAL PROCEDURES	\$25.38	\$21.94	\$20.11	\$13.23	\$8.35	\$12.70

				Hospital	s	Ph	ysicians' (	Office
MEDICAL					Standard			Standard
PROCEDURES		APG & ICD-9 DESCRIPTION	Mean	Median	Deviation	Mean	Median	Deviation
APG#	631	HEAD & SPINE INJURY						
CD9 CODE	854.00	Intracranial injury of other an unspecified nature, with out mention of open intracranial wound	\$45.69	\$29.57	\$44.06	\$12.52	\$12.52	\$4.73
APG#		OTHER INJURIES						
ICD9 CODE	897.0	Traumatic amputation of leg(s) (complete) (partial) unilateral, below knee/out mention of complication	\$5.18	\$5.18	\$2.06	\$16.73	\$16.73	\$16.19
APG#	646						l	
ICD9 CODE	. 312.9	Undersocialized conduct disorder, aggressive type, unspecified disturbance of conduct	\$18.30	\$18.29	\$18.28	\$12.07	\$12.07	\$4.09
APG#	647							
ICD9 CODE	319.0	Unspecified mental retardation	\$28.04	\$17.54	\$18.48	\$4.48	\$4.48	\$3.39
APG#	650							
ICD9 CODE	V70.2	General psychiatric examination, requested by the authority	\$34.37	\$34.37	\$29.01	\$0.78	\$0.78	N.A.
APG#	663						1	
ICD9 CODE	292.0	Drug psychoses, drug withdrawal syndrome	\$47.67	\$36.59	\$41.61	\$5.69	\$6.21	\$1.52
APG#		NEONATE & CONGENITAL ANOMALY						
ICD9 CODE	760.0	Fetus or newborn affected by maternal condition which may be unrelated to present pregnancy, maternal hy	\$14.34	\$1.83	\$23.23	\$11.48	\$9.18	\$6.48
APG#	948	COUNSELING						
ICD9 CODE	V65.5	Person with feared complaint in whom no diagnosis was made	\$53.10	\$25.91	\$60.32	\$4.59	\$4.59	N.A.
APG#	961							1
CD9 CODE	V72.5	Radiological examination, not elsewhere classified	\$14.18	\$14.18	\$18.75	\$5.20	\$4.97	\$3.87

MEAN, N	MEDIAN, ST	ANDARD DE			OR OVERH	EAD COSTS		L PROCEDU	IRES
		L	Hosp				Physicia	ns' Office	
MEDICAL				Standard				Standard	
PROCEDURES		Mean	Median	Deviation	Count	Mean	Median	Deviation	Count
APG#	901								
ICD9 CODE	600	\$18.92	\$14.62	\$12.86	7	\$8.45	\$8.21	\$4.73	
APG#	902								
ICD9 CODE	601.9	\$18.91	\$20.84	\$12.08	10	\$6.93	\$4.03	\$4.62	10
APG#	916								
ICD9 CODE	V72.3	\$14.09	\$11.97	\$10.38	11	\$7.78	\$6.30	\$4.98	8
APG#	932								
ICD9 CODE	043.9	\$28.64	\$23.38	\$23.71	7	\$43.09	\$14.09	\$51.18	3
APG#	933								
ICD9 CODE	429	\$28.76	\$23.38	\$22.69	9	\$35.78	\$16.71	\$44.83	4
ICD9 CODE	280.9	\$29.92	\$26.31	\$23.06	7	\$7.60	\$7.51	\$4,44	7
ICD9 CODE	281.9	\$23.20	\$27.00	\$12.95	6	\$8.65	\$7.37	\$6.05	6
ICD9 CODE	710.0	\$23,77	\$26.31	\$15.35	7	\$10,90	\$11.25	\$3.04	7
APG#	946								
ICD9 CODE	V70.0	\$27.99	\$29.87	\$23.18	6	\$14.44	\$9.18	\$11,21	7
APG#	947								
ICD9 CODE	V20.2	\$18.94	\$13.18	\$23.59	4	\$11.06	\$6.97	\$9.64	6
APG#	948								
ICD9 CODE	V65.5	\$53.10	\$25.91	\$60.32	3	\$4.59	\$4.59	N.A.	1
APG#	949								
ICD9 CODE	V25.09	\$14.27	\$11.15	\$16.65	5	\$7,21	\$4.02	\$8.09	6
APG#	950								
ICD9 CODE	V68.1	\$7,64	\$6.64	\$7,36	7	\$5.00	\$4.31	\$3.90	6
APG#	951			,					
ICD9 CODE	V67.0	\$14.90	\$15.91	\$9.83	8	\$7.36	\$6.13	\$4,22	8
ICD9 CODE	V67.2	\$25.54	\$26.39	\$21.39	4	\$19,08	\$8.76	\$25.21	4
APG#	961								
ICD9 CODE	V72.5	\$14.18	\$14.18	\$18.75	2	\$5.20	\$4.97	\$3,87	3
APG#	976								
ICD9 CODE	V22.2	\$15.84	\$12.76	\$12.54	6	\$6.90	\$4.97	\$6.89	5



	MILMIN	AND STANDARD DEVIATION						Indirect La	bor Costs					
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			(1000	Standard	(0000	Standard		Standard		Standard		Standard		Standa
SURGICAL		THE PERSON NAMED IN THE PE	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviati
PROCEDURES		APG AND CPT DESCRIPTION		Deviation	Micun	Deviation								
APG#	2	SUPERFICIAL NEEDLE BIOPSY & ASP	\$28.23	\$31,54	\$18.19	\$12,40	\$9.50	N.A.	\$25.52	N.A.	\$39.90	\$41.38	\$6.22	N.A.
CPT CODE		Puncture Aspiration of Cyst of Breas	N.A.	N.A.	\$43.01	\$33,39	N.A.	N.A.	\$39.19	N.A.	\$56.19	\$38.22	\$63.63	\$71.7
CPT CODE		Biopsy of breast, needle (separate pr	N.A.	N.A.	\$29.45	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	\$149.11	N.A
CPT CODE		Biopsy, thyroid, percutaneous needl	N.A.	N.A.	020.40	14101	140711	1417.11						
APG#	3	SIMPLE INCISION & DRAINAGE	100.10	\$24.54	\$22,30	\$14.97	\$10.97	N.A.	\$36,45	N.A.	\$56.01	\$57.40	\$19.75	\$11.3
CPT CODE		Incision and drainage of infected or	\$26.49		\$20.04	\$14.58	\$10.97	N.A.	\$30.38	\$8.58	\$25.26	\$12.83	\$13.86	\$7.03
CPT CODE		Incision and drainage of abscess (e.g.	\$30.88	\$23.76	\$18.46	\$16.67	\$12.64	\$2.36	\$91.36	\$101.87	\$40.07	\$28.05	\$55.20	\$73.8
CPT CODE		Incision & removal of foreign body s	\$27.60	\$24.02	\$10.40	\$10.07	V12.04	VZ.00	101100					
APG#	4	COMPLEX INCISION AND DRAINAGE		404.70	404.00	\$23.85	N.A.	N.A.	\$164.03	\$146.03	\$70.31	\$56.17	\$21.83	\$11.0
CPT CODE		Incision and drainage of hematoma;	\$39.63	\$34.70	\$34.66	\$25.62	\$16,07	N.A.	\$305.82	N.A.	\$65.27	\$46.21	\$14.00	N.A
CPT CODE		Incision and drainage, complex, post	\$43.45	\$34.16	\$36.44	\$16.34	\$16.07	N.A.	\$57.41	N.A.	\$35.07	\$6.41	\$14.00	N.A
CPT CODE		Incision and drainage, upper arm or	\$39.51	\$42.15	\$25.91	\$15.34	N.A.	N.A.	N.A.	N.A.	\$75.31	\$80.61	\$10,66	N.A
CPT CODE	28002	Deep dissection below fascia, for de	\$34.90	\$29.32	\$19.85	\$12.43	N.A.	N.A.	IV.M.	14.7.	473.01	400101	710100	
APG#	5	COMPLEX INCISION AND DRAINAGE					\$8.42	N.A.	\$30.07	N.A.	\$37.96	\$33.08	\$16.45	\$12.
CPT CODE		Debridement of nails, manual; five o		\$19.27	\$19.03	\$14.52		N.A.	\$30.07	N.A.	\$57.16	\$56.41	\$16.45	\$12.
CPT CODE	111701	Debridement of nails, manual each a	\$28.53	\$25.62	\$27.75	\$26.76	\$8.42	N.A.	931.50	14.0.	V37.10	400141		
APG#	6	SIMPLE DEBRIDEMENT & DESTRUCT						N.A.	\$39.19	N.A.	\$56,80	\$35.38	\$24.40	\$17.
CPT CODE	11040	Debridement of skin, partial thicknes	\$30.15	\$23.62	\$20.35	\$15.05	N.A.		\$39.19	N.A.	\$34.41	\$43.20	\$16.15	\$9.1
CPT CODE		Avulstion of nail plate, partial or co	\$21.12	\$17.53	\$18.01	\$11.18	\$9.70	\$1.81	\$43.74	N.A.	\$52.50	\$40.14	\$22.51	\$16.
CPT CODE	17000	Destruction by any method, with or	\$45.72	\$51.41	\$16.29	\$11.37	\$10.97	N.A.		\$157.07	\$48.91	\$39.48	\$40.70	\$23.
CPT CODE	20670	Removal of implant superficial, (e.g.,	\$39.70	\$34.68	\$27.98	\$20.83	\$11.86	\$5.95	\$182.59	\$157.07	948.31	¥33.40	940.70	420.
APG#	7	SIMPLE EXCISION & BIOPSY							100.00	\$111.56	\$43.56	\$34.34	\$54,22	\$55.
CPT CODE	11401	Excision, benign lesion, except skin t	\$26.51	\$29.13	\$19.15	\$15.64	\$5.58	\$7.63	\$96.96	\$92.98	\$50.70	\$34.66	\$56.86	\$56.
CPT CODE	11440	Excision, other benign lesion (unless	\$32.45	\$28.79	\$20.97	\$19.13	\$8.83	\$2.43	\$61.40	N.A.	\$45.69	\$30.74	\$54.38	\$58.
CPT CODE		Excision, malignant lesion; trunk, ar	\$27.99	\$24.14	\$21.71	\$16.09	\$8.29	\$2.72	\$39.19		\$45.09	\$33.82	\$60.54	\$64
CPT CODE		Excision, malignant lesion, face, ear	\$31.46	\$26.75	\$22.44	\$19.64	\$8.83	\$2.43	\$32.61	\$11.56	\$46.19	\$33.02	\$60.54	904
APG#	8	COMPLEX EXCISION, BIOPSY & DES	BRIDEMEN	T							\$45.91	\$37.78	\$55.35	\$55
CPT CODE		Excision, benign lesion, except skin t		\$28.60	\$23.40	\$17.33	\$10.97	N.A.	\$85.21	\$82.41			\$55.35	\$55
CPT CODE		Excision, benign lesion, except skin to		\$29.07	\$23.76	\$17.14	\$10.97	N.A.	\$86.62	\$93.75	\$54.39	\$38.08	\$67.05	\$72
CPT CODE		Excision, malignant, lesion, face, ear	\$32.43	\$32.20	\$29.70	\$21.83	\$10.20	N.A.	\$34.23	\$12.06	\$41.61	\$23.98	\$67.05	\$12
APG#	9	LIPECTOMY & EXCISION WITH REC	ONSTRUC	TION							101.01	470.05	N.A.	N.
CPT CODE		Excision, excessive skin and subcuta	\$51.47	\$46.05	\$36.99	\$29.65	N.A.	N.A.	\$66.53	N.A.	\$91.64	\$79.95		N.
CPT CODE		Excision, leg pressure ulcer, with loc		\$61.71	\$47.36	\$36.63	N.A.	N.A.	N.A.	N.A.	\$99.27	\$70.03	\$22.88	N.
CPT CODE	137739	Ligation and division and completion	\$102.67	\$94.11	\$93.53	\$52.87	N.A.	N.A.	N.A.	N.A.	\$153.00	\$133.33	\$29.55	14.
APG#	10	SIMPLE SKIN REPAIR									1	110.11	40.55	N.
CPT CODE		Simple repair of superficial wounds	\$31.38	\$31.20	\$16.18	\$13.17	\$11.06	\$7.27	\$123.97	\$119.89	\$49.47	\$43.11	\$9.55	
CPT CODE		Simple repair of superficial wounds	\$38.05	\$42.55	\$19.77	\$24.67	\$11.06	\$7.27	\$123.97	\$119.89	\$76.68	\$83.43	\$17.56	\$11
CPT CODE	1203		\$37.20	\$33.83	\$30.19	\$25.58	N.A.	N.A.	\$160.37	\$171.37	\$65.43	\$71.75	\$10.66	N.
APG#	11	COMPLEX SKIN REPAIR												+
CPT CODE		Simple repair or superficial wounds	\$35.04	\$34.83	\$28.25	\$19.18	N.A.	N.A.	\$43.74	N.A.	\$55.22	\$48.12	\$10.66	N.
		7 Simple repair or superficial wounds	\$41.79	\$42.39	\$39.93	\$30.66	N.A.	N.A.	\$52.86	N.A.	\$79.62	\$80.86	\$9.55	N.
CPT CODE	1201	Layer closure of wounds of face, ear		\$50,81	\$36.92	\$27.60	N.A.	N.A.	N.A.	N.A.	\$77.55	\$82.71	\$11.77	N.
CPT CODE	12054	2 Blepharoplasty, upper eyelid	\$69.79		\$45.13	\$36.74	\$22.44	N.A.	\$74.86	\$36.83	\$89.00	\$50.53	\$87.71	\$69
CPT CODE		SKIN & INTEGUMENT GRAFT, TRAN						1						
APG#	12	Adjacent tissue transfer or rearrange	0E0 00	\$57.03	\$35.39	\$31.57	N.A.	N.A.	\$308.52	\$167.80	\$85.71	\$61.34	\$53.28	\$34

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								Indirect La	bor Costs		A.S			
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			(1000	)-2999)	(3000	-5999)	(60	00+)	(1000	-2999) Standard	(3000	Standard	1001	Standard
SURGICAL				Standard		Standard		Standard	11	Deviation	Mean	Deviation	Mean	Deviation
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean \$78.54	\$36.32	\$103.56	\$80.40	\$83.22	\$93.18
CPT CODE		Split graft, trunk, scalp, arms, legs,	\$74.33	\$61.60	\$55.37	\$36.10	\$33.92	N.A.			\$1103.88	\$60.40	\$43.74	\$24.78
CPT CODE	15260	Full thickness graft, free, including d		\$74.43	\$47.45	\$42.34	\$33.92	N.A.	\$186.38	N.A.	\$110.36	\$60.17	343.74	724.70
APG#	27	SIMPLE INCISION & EXCISION OF 8F								\$23.00	\$67.30	\$44.09	\$60.71	\$41.01
CPT CODE	19101	Biopsy of breast, incisional	\$38.12	\$34.27	\$25.66	\$21.81	\$10.63	\$4.44	\$73.67		\$77.81	\$53.10	\$67.73	\$47.68
CPT CODE	19120	Excision or cyst, fibroadenoma, or ot	\$36.97	\$29.97	\$31.67	\$28.19	\$12.07	\$5.49	\$128.24	\$140.30	\$77.81	\$53.10	\$07.73	747.00
APG#	28	<b>BREAST RECONSTRUCTION &amp; MAS</b>		1				-			\$79.54	\$45.42	\$89.07	\$65,49
CPT CODE	19140	Mastectomy for gynecomastia throu		\$50.87	\$51.51	\$51.44	\$7.65	N.A.	\$58.79	\$23.83	\$87.98	\$65.98	\$93.09	\$79.71
CPT CODE	19160	Mastectomy, partial	\$67.16	\$48.63	\$56.27	\$58.48	\$20.78	\$18.58	\$63.44	\$17.28			\$97.98	\$115.63
CPT CODE	19182	Mastectomy, subcutaneous	\$51.60	\$40.73	\$47.01	\$51.13	\$13.14	\$7.76	\$44.37	N.A.	\$146.48	\$117.98	957.96	4110.00
APG#	53	OCCUPATIONAL THERAPY									11.4	N.A.	N.A.	N.A.
CPT CODE	97540	Training in activities of daily living (s	\$10.98	\$8.32	\$7.61	N.A.	\$3.44	\$2.58	N.A.	N.A.	N.A.			N.A.
CPT CODE	97541	Training in activities of daily living (s	\$11.24	N.A.	N.A.	N.A.	\$3.10	\$3.80	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	54	PHYSICAL THERAPY											N. A.	N.A.
CPT CODE	97010	Physical medicine treatment to one	\$11.24	N.A.	N.A.	N.A.	\$2.81	\$2.55	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	97128	Physical medicine treatment to one	\$7.49	N.A.	N.A.	N.A.	\$1.68	\$1.63	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	55	DIAGNOSTIC ARTHROSCOPY						1				100.00	\$64.87	\$13.46
CPT CODE	29815	Arthroscopy, shoulder, diagnostic, w	\$43.77	\$27.98	\$38.40	\$18.34	\$26.27	N.A.	\$165.25	\$188.55	\$66.96	\$36.39		\$13.46
CPT CODE	29870	Arthroscopy, knee, diagnostic, with	\$35.33	\$23.59	\$29.28	\$21.10	\$14.71	\$5.53	\$143.41	\$160.85	\$78.68	\$64.24	\$120.11	\$93.37
APG#	56	THERAPEUTIC ARTHROSCOPY												107.00
CPT CODE	29877	Arthroscopy, knee, surgical debride	\$43.26	\$37.16	\$25.08	\$19.89	\$13.25	\$4.10	\$175.28	\$147.29	\$76.03	\$69.55	\$123.40	\$87.60
CPT CODE		Arthroscopy, knee, surgical with me	\$56.40	\$52.03	\$30.95	\$24.59	\$17.07	\$11.41	\$206.99	\$200.51	\$98.96	\$69.08	\$126.86	\$95.37
APG#	57	REPLACEMENT OF CAST											144.00	\$7.56
CPT CODE	29075	Application elbow to finger (short ar	\$26.30	\$23.79	\$12.26	\$4.44	\$16.11	\$11.57	\$132.37	\$131.78	\$20.54	N.A.	\$14.90	N.A.
CPT CODE	29405	Application	\$27.72	\$28.92	\$30.82	\$37.29	N.A.	N.A.	\$132.37	\$131.78	\$37.63	\$24.17	\$20.24	N.A.
APG#	58	SPLINT, STRAPPING & CAST REMO	VAL			1						10117	444.00	\$7.56
CPT CODE	29125	Application of short arm splint (forea	\$26.30	\$23.79	\$12.52	\$5.18	\$34.27	N.A.	\$132.37	\$131.78	\$37.63	\$24.17	\$14.90	N.A.
CPT CODE	29580	Strapping unna boot	\$11.06	\$12.64	\$12.89	N.A.	\$0.57	N.A.	\$20.96	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	59	TREATMENT OF CLOSED FRACTUR	E & DISLO	CATION OF	FINGER, T	OE & RIB				-				N.A.
CPT CODE	21800	Treatment of rib fracture, closed, un		\$53.49	\$26.33	\$14.92	\$1.49	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	
CPT CODE	26720	Treatment of closed phalangeal shaf	\$23.30	\$23.24	\$21.61	\$11.82	\$1.03	N.A.	\$34.63	N.A.	\$46.01	\$29.86	\$14.34	\$8.34
APG#	60	TREATMENT OF CLOSED FRACTUR	E & DISLO	CATION EX	CEPT FING	ER, TOE & F	IIB	1						1004
CPT CODE	25600	Treatment of closed distal radial frac	\$33.98	\$30.56	\$31.58	\$17.02	\$13.46	N.A.	\$112.07	\$86.32	\$57.38	\$36.23	\$19.40	\$9.84
CPT CODE		Treatment of closed distal radial frac		\$24.95	\$19.64	\$18.80	\$10.33	N.A.	\$60.99	\$30.84	\$53.73	\$38.76	\$14.90	\$7.56
CPT CODE	28470	Treatment of closed metatarsal fract	\$37.58	\$35.68	\$9.39	\$5.03	\$14.31	N.A.	\$52.86	N.A.	\$21.50	\$1,36	\$13.79	\$9.13
APG#	62	TREATMENT OF OPEN FRACTURE &	DISLOCA	TION EXCE	PT FACE				1	1				
CPT CODE	25615	Treatment of open distal radial fract	\$61.20	\$58.85	\$56.26	\$38.95	N.A.	N.A.	N.A.	N.A.	\$118.49	\$103.26	\$48.49	N.A.
CPT CODE		Open treatment of closed or open di	\$61.64	\$61.06	\$43.61	\$40.26	\$18.62	N.A.	\$161.32	N.A.	\$83.83	\$70.97	\$37.42	\$18.99
CPT CODE	26735	Open treatment of closed or open ph	\$55.76	\$59.61	\$49.26	\$30.83	\$10.80	N.A.	\$500.00	N.A.	\$82.09	\$67.08	\$35.69	\$18.11
APG#	63	JOINT MANIPULATION UNDER ANE	STHESIA											
CPT CODE		Manipulation under anesthesia, shou		\$26.06	\$14.59	\$10.19	N.A.	N.A.	\$85.42	\$63.83	\$46.20	\$20.90	\$18.45	\$8.16
CPT CODE		Manipulation of knee joint under gen		\$26.06	\$15.84	\$9.52	\$10.97	N.A.	\$39.19	N.A.	\$48.05	\$27.68	\$18.45	\$8.16
APG#	64	SIMPLE MAXILLOFACIAL PROCEDU											1	
CPT CODE		D Drainage of hematoma, nasal, intern	\$32.88	\$31.19	\$26.13	\$17.18	N.A.	N.A.	\$43.74	N.A.	\$67.89	\$60.56	\$16.63	\$8.44
CPT CODE		Excision, nasal polyp(s), simple unila		\$27.68	\$30.47	\$20.35	N.A.	N.A.	\$52.86	N.A.	\$91.69	\$91.47	\$14.90	\$7.56
CPT CODE		Excision, nasal polyp(s), simple bilat		\$35.07	\$45.28	\$18.30	N.A.	N.A.	\$52.86	N.A.	\$69.33	\$55.82	\$20.09	\$10.20

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CFT CODE 27345 Excision, silecranon bursa 93.3,22 93.6,5 98.9,3 19.12 818.62 N.A. 1278.02 N.A. 156.98 446.87 879.84 891.83 APG 275 CFT CODE 27345 Excision of synovial reprolately, interceptal 98.0.3 98.0,2 93.6,7 979.84 891.83 APG 275 CFT CODE 25447 Interposition arthroplasty, interceptal 98.0,3 98.0,8 93.6,9 93.6,7 979.84 891.83 APG 275 CPT CODE 254547 Interposition arthroplasty, interceptal 98.0,3 98.0,8 93.6,9 93.6,7 97.8 N.A. 157.76 N.A. 157.76 95.0,2 93.4,3 N.A. 157.76 APG 275					~								API	ENDIX	r
SURGICAL  APG AND CPT DESCRIPTION  MEAN PROCEDURES  6. COMPLEX MAXILLOFACIAL PROCEDURES  6. COMPLEX MAXILLOFACIAL PROCEDURES  6. COMPLEX MAXILLOFACIAL PROCEDURES  6. COMPLEX MAXILLOFACIAL PROCEDURES  6. COMPLEX MAXILLOFACIAL PROCEDURES  6. COMPLEX MAXILLOFACIAL PROCEDURES  6. COMPLEX MAXILLOFACIAL PROCEDURES  6. COMPLEX MAXILLOFACIAL PROCEDURES  6. INCISION OF SONE, JOINT, A TRONO  6. COMPLEX MAXILLOFACIAL PROCEDURES  6. COMPLEX MAXILLOFACIAL PROCEDUR		NACAN	AND CTANDARD DEVIATION	EOD INC	IDECT I A	BOB CO	STS BV F	ACILITY	TYPE ANI	VOLUM	AF - SURC	SICAL PR	OCEDUR	S	
No.   No.		WEAN	AND STANDARD DEVIATION	FOR INL	INECT EA	BUN CU	313 01 1	MOILITI			12 - 00110	JOAL III	OOLDOIN		
Volume							nit al		manect L	DOI COSTS		Δ	s C		
SURRICAL				Ma	li ima n			Vo	lumo	Vol	uma			Vol	ume
Syndrical   APG AND CFT DESCRIPTION   Mean Devision   Mean D															
APC   APC				(100)		(3000		100		(1000		13000		(00)	
PROCECUTION   1700						14		Mann		Mann		Maan		Mean	
TOTO TODS 365 COMPEEX MAXILLOFACIAL PROCEDURES 30570 Statements of the process of															
CRT CODE 30520 Septoplasty or submucous resection \$42.95   17.07   948,34   93.55   17.26   93.14   88.94   944.75   99.02   128.27   95.15   158.81   158.20   17.07   948,34   93.25   17.07   948,34   93.25   17.07   948,34   93.25   17.07   948,34   93.25   17.07   948,34   93.25   17.08   94.07   17.08   18.00   17.08   18.00   17.08   18.00   17.06   19.00   17.06   19.00   17.06   19.00   17.06   19.00   17.06   19.00   17.06   19.00   17.06   19.00   17.06   19.00   17.06   19.00   17.06   19.00   17.06   19.00   17.06   19.00   17.06   19.00   17.06   19.00   17.06   19.00   19.00   17.06   19.00   1					\$20.50	\$50.03	931.00	914.75	14.75	\$42.00	74.03	0107.01	¥100.07	4100101	*******
CPT CODE   305050   Springers   495.06   16.5.5   45.5.0   35.9.8   17.2.6   93.1.4   892.9.4   99.0.0   124.8.2   99.6.1   47.5.6   224.4.4   24.6.6   24.5.6   24.5.6   24.5.8   24.6.6   24.6					447.07	A40.24	A22 EE	617.26	60.14	660.40	644.76	600 27	462 15	\$158.81	\$152.30
AFG PAGE   See   S															
CPT CODE 2870 Gapulotomy for contracture; metal 347,97 43,92 927,48 921.10 912.35 98.87 9152.48 9152.48 915.20 87.67 CODE 2870 Suniform processing with the state of the state					\$16.55	\$45.60	\$35.98	\$17.20	\$9.14	\$62.94	\$5.00	9124.02	955.01	347.00	722.44
CPT CODE 28270 Capsulotomy for commercine, mixing 547.87 843.83 824.99 826.46 N.A. N.A. \$200.98 9184.96 972.44 953.24 \$23.62 915.20 AFG 28270 Bullow Mygos (Duminor Commercine, will A5.78 843.83 91.89 918.26 924.97 926.27 N.A. \$207.98 918.68 918.67 977.02 881.21 955.55 CPT CODE 28290 Hallow alloys (Duminor Commercine, will A5.78 841.79 925.89 924.97 926.27 N.A. \$207.98 918.68 918.67 977.02 881.21 955.55 CPT CODE 28290 Hallow alloys (Duminor Commercine, will A5.78 841.79 925.89 924.97 926.27 N.A. \$207.98 918.68 956.67 977.02 881.21 955.55 CPT CODE 2820 Hallow alloys (Duminor Commercine, will A5.78 841.79 925.89 924.97 926.27 N.A. \$207.98 918.68 956.67 977.02 881.21 955.55 CPT CODE 2820 Hallow alloys (Duminor Commercine, will A5.78 841.79 925.89 924.97 926.27 N.A. \$1207.99 918.68 956.67 977.02 881.21 955.55 CPT CODE 2820 918.00 100.00 PM Commercine, will alloy						100 10	404.40	440.05	40.07	41.00.40	4100.60	AE2 12	642.00	6E0 24	627 E1
AFGY 67 BUNNON PROCEDURES  FOR CODE 20259 Hallow valgus bunnerlo correction, will 46,78 931,89 936,26 924,92 926,27 N.A. 9146,96 9142,61 976,31 976,92 9108,03 9107,54 PM PM PM PM PM PM PM PM PM PM PM PM PM															
CPT CODE 28294 Hallux valgus (bunnel) correction, will 45,78   331,89   382,69   249,29   252,27   N.A.   1207,98   3197,68   956,77   377,02   891,21   455,56   677,00   2829,47   2829,				\$47.67	\$43.63	\$24.99	\$26.46	N.A.	N.A.	\$200.36	\$104.30	\$72.44	955.24	923.0Z	913.20
CPT CODE 2825   Hallow valgus Dumlor Correction, will 47,64   441,75   35,88   24,97   26,27   N.A.   \$146,96   \$142,61   \$76,31   \$78,92   \$108,03   \$107,54   AFGY 88   EXCISION OF BONE, JOHT & TENDON FTHE HAND & FOOT   28080   Excision of interdigital (Morton) neur   345,76   326,53   390,65   322,98   316,65   328,93   316,65   322,98   316,61   313,93   310,506   511,17   344,76   344,74   345,44   345,42   CPT CODE 28080   Excision of interdigital (Morton) neur   345,76   346,31   390,65   322,98   316,65   328,93   316,61   313,93   310,506   511,17   344,76   344,74   345,44   CPT CODE 2105   Excision, oleranon bursa   333,22   331,91   380,65   322,98   316,69   N.A.   316,91   314,18   355,84   346,74   345,44   CPT CODE 2136   Excision of symotol year of popietal   382,25   326,53   319,03   316,69   N.A.   N.A.   3152,79   3147,77   670,33   43,76   311,59   316,53   AFGY 70   ARTHROPLASTY   ARTHROPLASTY   332,48   334,95   330,05   227,31   313,14   37,65   314,77   37,67   343,76   311,59   316,53   AFGY 71   HAND & FOOT TENDON MARK   334,95   330,05   237,31   313,14   37,66   3178,56   3178,56   3178,56   3178,56   3178,56   AFGY 71   HAND & FOOT TENDON MARK   344,55   326,53   319,04   345,64   346,54						100.00	101.00	100.07		4007.00	A107.00	ADE 67	677.02	601 21	000 00
AFG 2 16 CACCION OF BOILE, COUNT & TENDON OF THE HAND & FOOT AFG 2 25.5 1919.03 10.44 196.16 1131.93 105.06 196.17 144.76 154.94 145.76 170.00 2010 120.00 1															
CFT CODE 2808   Excision of inerdiginal Mortan near   \$34.41   \$28.76   \$26.53   \$19.03   \$10.44   \$6.16   \$131.93   \$10.05   \$61.17   \$44.76   \$44.34   \$45.48   \$45.48   \$45.27   \$42.75   \$42							\$24.97	\$26.27	N.A.	\$146.96	\$142.61	\$76.31	\$78.92	\$100.03	\$107.54
CPT CODE 28006   Scalasin of interdigital (Morrol) neur   45,76   544,31   39,05   522,98   18,62   N.A.   3146,91   3134,18   565,84   548,74   554,48   532,79   326,77   32											1105.00	101.17	44470	45404	0.45 43
ARGY															
CFT CODE 27345 Excision, silecranon bursa 933,22 931,91 928,35 919,12 918,62 N.A. 1278,02 N.A. 156,08 946,67 979,84 9812,33 AFG 275 CFT CODE 27345 Excision of synovial reyrot of popleta 9 88,02 936,05 928,93 18.6,9 N.A. N.A. 1512,79 147,77 96,03 43,76 931,59 118,33 AFG 70 ARTHROPLASTY 25447 Interposition arthroplasty, interceptal 988,03 980,82 935,72 926,73 97,65 N.A. 159,19 N.A. 150,07 156,03 43,76 93,03 934,37 N.A. 150,00 10,0	CPT CODE						\$22.98	\$18.62	N.A.	\$146.91	\$134.18	\$65.84	\$48.74	\$54.48	¥32.79
CPT CODE 2736   Scientific of synowial cyst of popties   588.22   92.65   288.33   816.89   N.A.   N.A.   9152,79   9147,77   967.03   943.76   931.59   918.53   AFGF 70   ARTHROPLASTY   S8.22   92.65   288.33   816.89   N.A.   N.A.   9152,79   9147,77   967.03   943.76   931.59   918.53   AFGF CODE 28447   Interposition arthropiasty, intercarpal   958.03   93.95   93.05   927.31   913.14   97.76   N.A.   N.A.   91.67   950.32   93.47   N.A.   AFGF 71   HAND & FOOT TENTOTOMY   S9.22   93.83   93.27   92.287   913.14   97.76   N.A.   N.A.   941.74   921.44   944.50   931.88   AFGF 72   SIMPLE HAND & FOOT REPAIR EXCEPT TENTOTOMY   S9.22   93.83   923.20   911.90   N.A.   N.A.   N.A.   94.61   918.50   915.55   92.09   910.20   AFGF 73   CMPREX HAND & FOOT REPAIR EXCEPT TENTOTOMY   S9.22   93.83   923.20   914.50	APG#					FOOT						150.00	440.07	470.04	404.00
AFG 70 ATTMOPRAST	CPT CODE														
CPT CODE 2645 Arthoropast interphalageal joint is 33,348 34,95 48,96 30,06 92,73 1 813,46 93,19 1 8,7,6 NA. 839,19 NA. 970,67 850,32 334,37 NA. 677 CODE 2645 Arthoropast interphalageal joint is 33,348 34,96 93,00 92,37 1 813,46 93,19 1 8,7,6 NA. NA. 94,174 \$21,44 \$44,50 93,19 NA. 970,67 86,00 93,10	CPT CODE			\$38.22	\$32.65	\$28.93	\$16.69	N.A.	N.A.	\$152.79	\$147.77	\$67.03	\$43.76	\$31.59	\$18.53
CPT CODE 2858 Anthropisms interphalangeal inte	APG#	70	ARTHROPLASTY												
APG 7 71 [HAND & FOOT TENDTONY] FOR TOOL 20455 Tendromy, pen, extension for the per in 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3,	CPT CODE														
CFT CODE 28294 Tenchomy, Service stress of control 1, 40.22 38.83 323.20 323.20 311.90 N.A. 57.41 N.A. 95.95.60 125.65 56 20.09 910.20 AFG 22 38.94 N.A. 57.41 N.A. 95.74 N.A. 95.75 246.38 910.24 N.A. 95.74 N.A. 95.75 246.38 910.24 N.A. 95.74 N.A. 95.75 246.38 910.20 N.A. 95.74 N.A. 95.75 910.20 N.A. 95.74 N.A. 95.75 910.20 N.A. 95.74 N.A. 95.75 910.20 N.A. 95.74 N.A. 95.75 910.20 N.A. 95.74 N.A. 95.75 910.20 N.A. N.A. N.A. N.A. N.A. N.A. N.	CPT CODE	26535	Arthroplasty interphalangeal joint; si	\$37.48	\$34.95	\$30.05	\$27.31	\$13.14	\$7.76	N.A.	N.A.	\$41.74	\$21.44	\$44.50	\$31.88
CPT CODE 28234 Tentomy, pene, extension, for to et al. 240,22   358,83   233,20   811,90   N.A.   N.A.   95,41   N.A.   93,560   812,5.65   20,009   \$10,20   APG# 72 SIMPLE HAND & FOOT REPAR EXCEPT TENOTOMY CPT CODE 28258   Hammertoe operation, one tow (e.g.   364,31   45,563   283,00   20,46   614,07   44,61   91,66   91,64,53   91,92,12   449,73   336,56   CPT CODE 28258   Hammertoe operation, one tow (e.g.   364,31   45,563   283,00   20,46   614,07   44,61   91,64,53   91,94,17   91,94,17   91,94   CPT CODE 28250   Arthrodesis, interphalangeal joint; wil 80,58   \$53,24   \$50,61   \$30,65   25,51   81,47   91,47	APG#	71	HAND & FOOT TENOTOMY												
AFGF 72 SIMPLE HAND & FOOT REPAIR EXCEPT TENDY ONLY  72 SIMPLE HAND & FOOT REPAIR EXCEPT TENDY ONLY  73 SIMPLE HAND & FOOT REPAIR EXCEPT TENDY ONLY  74 SIMPLE HAND & FOOT REPAIR EXCEPT TENDY ONLY  75 SIMPLE HAND & FOOT REPAIR EXCEPT TENDY ONLY  76 STORE 2838 Hammers operation of the page for 18,03,65 1919,99 916,46 191,10 94,461 19164,03 116,60 117,83 146,89 131,72 149,73 136,86 CPT CODE 2838 Hammers operation of the page for 18,03,65 126,30 120,46 114,07 14,61 19164,03 1159,51 198,27 147,12 172,06 198,78 117,00 11	CPT CODE														
CFT CODE   26055   Tendon sheath incision for trigger fin   30,36   \$27,56   \$19,99   \$16,46   \$9,18   \$9,34   \$166,60   \$117,83   \$46,99   \$31,72   \$49,73   \$39,86   \$67   \$70	CPT CODE	28234				\$23.20	\$11.90	N.A.	N.A.	\$57.41	N.A.	\$95.60	\$125.65	\$20.09	\$10.20
CFT CODE 20936   Name and experision one Toric leg.   54.3.1   45.5.3   28.3.0   20.46   314.07   54.61   3164.03   3159.51   988.27   547.12   372.06   397.81   AFGS   7.5   COMPGEX HANDS FOOT REPAIR   18.0.0									1				101 70	410.70	400.00
APG 27 COMPLEX HAND & FOOT REPAIR CFT CODE 28810 Arrhydesis, interphalangeal joint; will 860,58 \$53,24 \$50,61 \$30,65 \$25,00 N.A. \$337,70 \$249,43 \$104,21 \$100,09 \$37,89 \$14,19 \$47,46 \$47,00 \$2810 Arrhydesis, interphalangeal joint; will 860,58 \$25,56 \$25,51 \$17,55 \$14,79 N.A. \$43,74 N.A. \$81,10 \$45,96 \$47,46 \$4	CPT CODE	26055	Tendon sheath incision for trigger fin												
CFT CODE   2880   Arthodesis, interphalangeal joint, vil. \$60,58   \$53,24   \$50,61   \$30,65   \$25,00   N.A.   \$437,70   \$249,43   \$104,21   \$100,09   \$37,88   \$14,19   \$107,00   \$27,00   \$27,00	CPT CODE	28285		\$54.31	\$45.63	\$28.30	\$20.46	\$14.07	\$4.61	\$164.63	\$159.51	\$68.27	\$47.12	\$72.06	\$87.81
CPT CODE 28810 Ambutasia, with the size of	APG#	73	COMPLEX HAND & FOOT REPAIR												
APPLICATION   APPLICATION	CPT CODE	26860	Arthrodesis, interphalangeal joint; wi												
CFT CODE   23420   Rappiir of complete shoulder (tratator)   566,31   566,31   567,34   523,78   N.A.   N.A.   N.A.   1189,87   N.A.   514,06   510,174   561,28   N.A.   N.A.   576,00   510,174   561,28   N.A.   N.A.   516,00   510,174   561,28   N.A.   N.A.   189,87   N.A.   514,00   510,174   561,28   N.A.   N.A.   189,87   N.A.   514,00   510,174   561,28   N.A.   N.A.   189,87   N.A.   514,00   510,174   561,28   N.A.   N.A.   189,87	CPT CODE	28810	Amputation, metatarsal, with toe, si						N.A.	\$43.74	N.A.	\$61.16	\$41.05	\$45.96	\$47.46
Section   Sect	APG#														-
APG# 75 ARTHROTOMY EXCEPT OF HAND & FOOT OFF CODE 27332 Arthrotomy, time, for excision of se   58.11   48.05   527.08   519.00   518.62   N.A.   N.A.   N.A.   544.39   51.47   542.75   528.10   OFF CODE 27333 Arthrotomy, time, for excision of se   344.88   30.04   377.95   510.48   N.A.   N.A.   N.A.   N.A.   N.A.   449.61   65.91   442.75   528.10   APG# 76 ARTHROCENTESIS & LIGAMENT OR TENDON INJECTION OFF CODE 20550 Injection, tendon sheath, ligament, i   340.81   55.30   516.91   37.29   N.A.   N.A.   N.A.   107.33   559.26   556.11   336.18   332.64   225.54   OFF CODE 20550 Arthrocentesis, aspiration and/or inje   344.22   440.71   518.59   513.67   516.07   N.A.   341.01   N.A.   375.12   566.64   315.12   37.24   APG# 77 SPECECH THERAPY OFF CODE 20550 Speech, language or hearing therapy   16.34   38.68   31.98   N.A.   N.A.   N.A.   N.A.   N.A.   N.A.   N.A.   N.A.   N.A.   OFF CODE 92508 Speech, language or hearing therapy   16.34   38.68   31.98   N.A.	CPT CODE	23420	Repair of complete shoulder (rotator)												
CFT CODE   27323 Arthrotomy, knee, for excision of se   55.11   346.05   927.08   919.00   918.02   N.A.   N.A.   N.A.   N.A.   N.A.   944.39   31.47   342.75   \$28.10     AFG   76   ARTHROCENTESIS & LIGAMENT OR TENDON INSECTION   16.00	CPT CODE	25260			\$33.99	\$29.47	\$21.28	\$20.40	N.A.	\$167.71	\$155.99	\$98.50	\$76.38	\$59.02	\$61.18
CFT CODE   27333 Arthrotomy, knee, for excision of se   \$44.88   \$30.94   \$37.95   \$10.48   N.A.   N.A.   N.A.   N.A.   \$49.61   \$5.91   \$42.75   \$28.10     AFG#   76 ARTHROCENTESIS & LUGAMENT OR TENDON INJECTION   The Control of the Code   20550 injection, redon shearin, ligament, 1   \$40.81   \$55.30   \$16.91   \$7.29   N.A.   N.A.   \$10.733   \$59.28   \$56.81   \$35.18   \$32.64   \$25.54     CFT CODE   20605 Arthrocentesis, applration and/or inje   \$34.22   \$40.71   \$18.59   \$13.67   \$18.07   N.A.   \$44.01   N.A.   \$75.12   \$66.84   \$15.12   \$2.24     AFG#   77   SPEECH THERAPY   \$45.38   \$50.70   \$18.74   \$14.15   N.A.   N.A.   N.A.   N.A.   N.A.   \$10.73   \$10.75   \$1	APG#	75	ARTHROTOMY EXCEPT OF HAND &												
AFGF 76 ARTHROCENTESIS & LICAMENT OR TENDON NIJECTION (CFT CODE 2056) Injection, tendon sheah, ligament, 1 & 40.81 & 55.03 & 516.91 & 57.29 & N.A. N.A. 150.733 & 592.26 & 566.81 & 336.18 & 326.64 & 255.64 & 675.000 & 20605 Arthrocentesis, aspiration and/or inje 34.22 & 40.71 & 518.59 & 513.67 & 516.07 & N.A. & 941.01 & N.A. & 975.12 & 666.84 & 515.12 & 97.24 & 76.000 & 20610 Arthrocentesis, aspiration and/or inje 34.22 & 40.71 & 518.59 & 513.67 & 516.07 & N.A. & N.A. N.A. N.A. N.A. N.A. N.A.	CPT CODE	27332	Arthrotomy, knee, for excision of se	\$55.11											
CFT CODE   20550   Injection, tendon sheath, ligament, 1   40,81   \$55,30   \$16,91   \$7,29   N.A.   N.A.   N.A.   \$107,33   \$59,28   \$56,81   \$36,18   \$32,64   \$25,54   \$67 CODE   20605   Arthocentesis, aspiration and/or inje   \$45,36   \$50,70   \$18,79   \$13,07   \$16,07   N.A.   \$41,01   N.A.   \$47,51   \$86,68   \$15,12   \$92,24   \$27,24   \$2	CPT CODE	27333				\$37.95	\$10.48	N.A.	N.A.	N.A.	N.A.	\$49.61	\$5.91	\$42.75	\$28.10
CPT CODE   20650   Arthocentesis, application and/or inje   345,22   340,71   \$18.59   \$13.67   \$16.07   N.A.   \$41.01   N.A.   \$75.12   \$66.64   \$15.12   \$7.24	APG#	76	ARTHROCENTESIS & LIGAMENT OR	TENDON	INJECTION				1						
CPT CODE 20610 Arthrocentesis, aspiration and/or inje \$45.36 \$50.70 \$18.74 \$14.15 N.A. N.A. N.A. N.A. N.A. \$62.23 \$44.88 \$15.12 \$7.24 \$AFG\$ 77 SFEECH THERAPY CONCENTRATION OF THE PROPERTY OF	CPT CODE	20550	Injection, tendon sheath, ligament, t	\$40.81	\$55.30										
APG# 77 SPECENT HERAPY CACEPT SPIROMETRY	CPT CODE	20605	Arthrocentesis, aspiration and/or inje	\$34.22	\$40.71	\$18.59	\$13.67	\$16.07	N.A.						
APG# 77 SPEECH THERAPY  CPT CODE 92509 Speech, language or hearing therapy 16.34 88.68 31.98 N.A. 92.44 N.A. N.A. N.A. N.A. N.A. N.A. N.A. N	CPT CODE	20610	Arthrocentesis, aspiration and/or inje	\$45.36	\$50.70	\$18.74	\$14.15	N.A.	N.A.	N.A.	N.A.	\$52.23	\$44.68	\$15.12	\$7.24
CPT CODE   92508   Speech,   language or hearing therapy   N.A.		77	SPEECH THERAPY												
CPT CODE   92508   Speech, language or hearing therapy   N.A.	CPT CODE	92507	Speech, language or hearing therapy	\$16.34	\$8.68	\$1.98	N.A.								
APG#         79         PULMONARY TEST & THERAPY EXCEPT SPIROMETRY         9         9         9         9         9         1         9         9         1         9         1         2         1         2         1         1         1         2         1         1         2         1         1         2         1         1         2         1         2         1         2         2         2         2         1<		92508	Speech, language or hearing therapy	N.A.	N.A.	\$1.98	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE         94550 Intermittent positive pressure breathin         N.A.         N.A.         N.A.         \$1.48         \$1.02         \$0.58         \$1.03         N.A.         N.A.         N.A.         N.A.         N.A.         N.A.           CPT CODE         94760 Noninvasive ear or pulse oximetry fo         \$0.47         N.A.         \$0.57         \$0.57         \$1.28         \$2.29         N.A.         N.A.         N.A.         N.A.         N.A.				EPT SPIR	OMETRY										
CPT CODE 94760   Noninvasive ear or pulse eximetry to \$0.47   N.A. \$0.57   \$0.57   \$1.28   \$2.29   N.A.   N		94650				\$1.48	\$1.02	\$0.58		N.A.					
APG# 80 NEEDLE & CATHETER BIOPSY, ASPIRATION, LAVAGE & INTUBATION		94760	Noninvasive ear or pulse oximetry fo					\$1.28	\$2.29	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
	APG#		NEEDLE & CATHETER BIOPSY, ASPI	RATION, L	AVAGE & IN	MOITABUTE	1								

	MEAN	AND STANDARD DEVIATION	FOR IND	IRECT LA	BOK CO	SIS BY F	ACILITY			1E - 30NC	JICAL PR	CCLDON		
								Indirect La	bor Costs					
	,					spital						S.C.		
	:			lume		lume		lume		ume		ume		lume
			(1000	)-2999)	(3000	0-5999)	(60	00+}	(1000	-2999)	(3000	-5999)	(600	00+)
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviatio
CPT CODE	32000	Thoracentesis, puncture or pleural c	\$41.55	\$36.84	\$38.29	\$20.87	N.A.	N.A.	N.A.	N.A.	\$30.29	N.A.	N.A.	N.A.
CPT CODE	32405	Biopsy, lung or mediastinum, percut	\$52.50	\$68.68	\$65.80	\$31.88	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	81	SIMPLE ENDOSCOPY OF THE UPPER	AIRWAY											
CPT CODE	31505	Laryngoscopy, indirect (separate pro	\$28.80	\$22.10	\$25.15	\$15.96	\$10.97	N.A.	\$30.07	N.A.	\$73.36	\$77.25	\$43.82	\$33.35
CPT CODE	31510	Laryngoscopy, indirect (separate pro	\$25.70	\$19.55	\$22.68	\$13.78	\$10.97	N.A.	\$30.07	N.A.	\$66.41	\$82.33	\$43.82	\$33.35
APG#	82	COMPLEX ENDOSCOPY OF THE UPP	ER AIRWA											
CPT CODE	31535	Laryngoscopy, direct, operative with	\$36.90	\$30.70	\$32.57	\$19.95	\$9.65	\$7.27	\$65.55	\$24.40	\$57.04	\$38.74	\$44.24	\$45.31
CPT CODE		Laryngoscopy, direct, operative, wit	\$38.04	\$33.83	\$39.63	\$23.92	\$14.79	N.A.	\$71.40	\$26.22	\$84.67	\$43.91	\$35.86	\$28.25
APG#	83	SIMPLE ENDOSCOPY OF THE LOWER	AIRWAY											
CPT CODE	31622	Bronchoscopy diagnostic, (flexible or	\$32.96	\$29.19	\$20.80	\$18.58	\$8.79	\$3.95	\$102.54	\$106.79	\$72.96	\$66.09	\$24.95	N.A.
CPT CODE		Bronchoscopy with biopsy	\$44.26	\$36.86	\$21.13	\$19.70	\$9.51	\$4.47	\$52.86	N.A.	\$29.80	\$0.69	\$27.31	N.A.
APG#	84	COMPLEX ENDOSCOPY OF THE LOV	VER AIRW	AY										
CPT CODE	31628	Bronchoscopy w/ transbronchial lun	\$43.30	\$40.65	\$26.03	\$20.37	\$7.75	\$3.38	\$52.86	N.A.	\$38.12	N.A.	N.A.	N.A.
CPT CODE		Bronchoscopy with transbronchial n	\$45.18	\$51.62	\$34.45	\$24.55	\$4.51	N.A.	N.A.	N.A.	\$30.29	N.A.	N.A.	N.A.
APG#	85	NASAL CAUTERIZATION & PACKING	5											
CPT CODE		Control nasal hemorrhage, anterior,	\$46.32	\$43.98	\$33.90	\$25.09	\$7.69	\$8.84	\$24.92	N.A.	\$74.96	\$66.87	\$11.77	N.A.
CPT CODE	30903	Control nasal hemorrhage, anterior,	\$40.54	\$37.72	\$34.76	\$24.31	\$13.94	N.A.	N.A.	N.A.	\$67.65	\$39.84	\$11.77	N.A.
APG#	86	SIMPLE LIP, MOUTH & SALIVARY G	AND PRO	CEDURES										
CPT CODE		Excision of lesion of tongue without	\$42.73	\$36,62	\$27.08	\$19.72	\$13.52	N.A.	\$97.08	N.A.	\$60.93	\$30.51	\$23.07	\$15.98
CPT CODE		Excision of lesion of tongue with clo	\$37.09	\$28,42	\$28.02	\$17.17	\$13.52	N.A.	N.A.	N.A.	\$56.36	\$44.25	\$22.51	\$16.77
APG#	87	COMPLEX LIP, MOUTH, & SALIVARY		ROCEDURE	S									
CPT CODE		Vermilionectomy (lip shave), mucosa	\$46.01	\$40.40	\$28.65	\$18.49	N.A.	N.A.	N.A.	N.A.	\$84.64	\$69.49	\$20.09	\$10.20
CPT CODE		Excision of parotid tumor or parotid	\$81.66	\$74.00	\$77.79	\$57.68	N.A.	N.A.	\$82.93	N.A.	\$75.18	\$33.94	\$34.36	\$19.99
APG#	88	MISCELLANEOUS SINUS, TRACHEA		PROCEDURE	S									
CPT CODE		Sinusotomy, maxillary (antrotomy); r		\$16.71	\$63.25	\$38.54	\$18.62	N.A.	\$500.00	N.A.	\$105.90	\$80.44	\$111.50	\$110.20
CPT CODE		Ethmoidectomy intranasal, anterior	\$36.82	\$17.43	\$45.84	\$34,69	N.A.	N.A.	\$80,19	N.A.	\$108.35	\$79.18	\$103.70	\$121.55
APG#	105	EXERCISE TOLERANCE TESTS												
CPT CODE		Cardiovascular stress test using max	\$6.01	N.A.	\$3.36	\$2.07	\$0.13	\$0.15	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Cardiovascular stress test using max	N.A.	N.A.	\$2.41	\$1.75	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	106	ECHOCARDIOGRAPHY	7440											
CPT CODE		Echocardiography, real-time with im	\$4.51	N.A.	\$2.83	\$1.69	\$0.11	\$0.13	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Doppler echocardiography, pulsed w	\$1.50	N.A.	\$1.75	\$1.72	\$0.08	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	108	CARDIAC ELECTROPHYSIOLOGIC TE			1									
CPT CODE		Cardioversion, elective, electrical co	\$8.53	N.A.	N.A.	N.A.	\$2.08	\$3.27	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Induction of arrhythmia by electrical	N.A.	N.A.	N.A.	N.A.	\$0.03	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	109	VASCULAR CANNULATION WITH N												
CPT CODE		Placement of central venous cathete		\$51.75	\$28.07	\$22.81	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	\$159.32	N.A.
CPT CODE		Cannula declotting without balloon c		N.A.	\$29.67	\$22.86	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	110	DIAGNOSTIC CARDIAC CATHETERIA			122.57									
CPT CODE		Combined left heart catheterization,	N.A.	N.A.	N.A.	N.A.	\$0.10	\$0.11	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Combined right and left heart cathet	N.A.	N.A.	N.A.	N.A.	\$0.37	\$0.49	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	111	ANGIOPLASTY & TRANSCATHETER												1
		Percutaneous transluminal angioplas	N.A.	N.A.	N.A.	N.A.	\$43.47	\$46.85	N.A.	N.A.	N.A.	N.A.	N.A.,	N.A.
CPT CODE		Percutaneous transluminal coronary	N.A.	N.A.	\$21.11	N.A.	\$0.37	\$0.49	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.

P-5

.22.2

	MEAN	AND STANDARD DEVIATION	FOR INC	IRECT LA	BOH COS	SIS BY F	CILITY			IE - SUN	JICAL PR	OCEDON		
								Indirect La	bor Costs					
						pital						s.C.		lume
				lume		ume		ume		lume		lume		
			(1000	0-29991	(3000	-5999)	(60)	00+}	(1000	-2999)	(3000	-5999)	(60	00+}
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	33212	Insertion or replacement of pacemak	\$40.99	\$41.82	\$46.56	\$35.59	\$7.65	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	33219	Repair of pacemaker with replaceme	\$43.61	\$45.02	\$49.77	\$33.41	\$7.65	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	113	REMOVAL & REVISION OF PACEMAN	CER & VA	SCULAR DEV				1						
CPT CODE	33216	Insertion, replacement, or repositioni	\$27.07	\$16.75	\$33.66	\$36.13	\$7.65	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	36497	Removal of implantable intravenous i		\$15.28	\$38.07	\$29.41	\$18.62	N.A.	\$30.07	N.A.	\$70.74	\$61.44	\$50.83	\$56.81
APG#	114	MINOR VASCULAR REPAIR & FISTU	A CONST	RUCTION										
CPT CODE	35875	Thrombectomy and/or repair of arter	\$55.17	\$37.18	\$52.67	\$62.92	N.A.	N.A.	N.A.	N.A.	\$54.76	N.A.	N.A.	N.A.
CPT CODE		Insertion of implantable intravenous i	\$38.76	\$34.16	\$42.68	\$37.45	\$18.62	N.A.	N.A.	N.A.	\$66.93	\$49.17	\$12.88	N.A.
APG#	115	SECONDARY VARICOSE VEINS & VA	SCULAR	INJECTION										
CPT CODE		Ligation, division, and/or excision of		\$61.47	\$49.88	\$40.03	\$26.27	N.A.	\$99.33	N.A.	\$116.65	\$94.03	\$65.44	\$55,61
CPT CODE		Unlisted procedure, vascular surgery	N.A.	N.A.	\$38.43	N.A.	N.A.	N.A.	N.A.	N.A.	\$131.47	N.A.	N.A.	N.A.
APG#	116	VASCULAR LIGATION												
CPT CODE		Ligation, major artery (e.g., post-tra	\$53.40	\$47.77	\$55.64	\$21,19	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Interrupting, partial or complete, or f	\$54.64	\$41.89	\$92.04	\$102.38	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Ligation and division and complete s	\$56.16	\$42.93	\$54.13	\$60.83	N.A.	N.A.	\$140.03	\$144.38	\$77.64	\$55.66	\$62.77	\$58.67
APG#	117	CARDIOPULMONARY RESUSCITATION	N & INTL	BATION					-					
CPT CODE		Intubation, endotracheal, emergency	\$33.75	\$23.73	\$10.24	\$7.79	\$11.87	\$19.40	N.A.	N.A.	\$14.62	N.A.	\$6.22	N.A.
CPT CODE		Cardiopulmonary resuscitation (e.g.,	N.A.	N.A.	N.A.	N.A.	\$15.25	\$20,79	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	131	CHEMOTHERAPY BY INFUSION												
CPT CODE		Chemotherapy injection, intravenous	N.A.	N.A.	N.A.	N.A.	\$55.07	\$59.51	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy injection, intravenous	N.A.	N.A.	N.A.	N.A.	\$64.97	\$64,75	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy inject, iv, complex, u	N.A.	N.A.	N.A.	N.A.	\$98.03	\$11.50	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
	132	CHEMOTHERAPY EXCEPT BY INFUS		14.74	1417.11	1400	100.00			1				
APG# CPT CODE		Chemotherapy injection, intravenous	N.A.	N.A.	N.A.	N.A.	\$23.79	\$19.03	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
		TRANSFUSION & PHLEBOTOMY	14.77.	14.7.	14,75	14.71	720110							
APG#		Transfusion, blood or blood compon	\$88.12	\$10.64	\$18.54	\$17.60	\$4.60	N.A.	N.A.	N.A.	N.A.	N.A.	\$29.55	N.A.
CPT CODE		Push transfusion, blood, 2 years or u		N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		BLOOD & BLOOD PRODUCT EXCHA		14.75.	11.00	141/01	140.0	140.0		11111				
APG#	134		N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Exchange transfusion, blood, other t	N.A.	N.A.	\$254.68	\$173.27	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		DEEP LYMPH STRUCTURE & THYRO			\$254.00	V175.27	14.00	14,74,	141711	1101	1			
APG#				\$34.56	\$34.28	\$27.85	\$18.62	N.A.	\$40,26	\$11.38	\$80.88	\$61,15	\$59.02	\$61.18
CPT CODE		Biopsy or excision of lymph node(s);	\$41.04	\$38.05	\$44.67	\$44.23	\$10.97	N.A.	\$53.86	\$16.85	\$63,41	\$33.86	\$86.99	\$107.24
CPT CODE		Biopsy or excision of lymph node(s); ALIMENTARY TESTS AND SIMPLE T			344.07	744.25	010.07	141731	400.00	710100				
APG#			N.A.	N.A.	\$5.61	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Esophageal motility study		N.A.	\$6.10	\$0,69	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Esophagus, acid perfusion (Bernstein			\$0.10	\$0.05	IV.A.	14.A.	14.74	14.6.	14.74	14.54.	141741	
APG#	158	ESOPHAGEAL DILATION WITHOUT	\$33.31	\$32.72	\$15.06	\$13.65	\$5.34	\$3.12	N.A.	N.A.	\$43.35	N.A.	\$36.12	\$36.22
CPT CODE		Dilation of esophagus, by unguided	\$19.61	\$19.17	\$11.33	\$9.11	\$3.58	\$2.76	\$20.96	N.A.	\$19.84	N.A.	\$35.16	\$37.09
CPT CODE		Dilation of esophagus, by unguided PERCUTANEOUS & OTHER SIMPLE (				93.11	43.00	42.70	420.00	14.00	710.04	140741	1000	100.00
APG#	159		\$46.76	\$39.94	\$29.61	\$19.87	N.A.	N.A.	\$27,94	N.A.	N.A.	N.A.	\$16,22	N.A.
CPT CODE		Biopsy of liver, percutaneous needle	\$51.31	\$46.23	\$29.45	N.A.	\$18.94	N.A.	N.A.	N.A.	N.A.	N.A.	\$16.22	N.A.
CPT CODE		Biopsy, abdominal or retroperitoneal		N.A.	\$11.54	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Esophageal intubation and collection ANOSCOPY WITH BIOPSY & DIAGNO	\$36.21			IN.A.	IN.A.	IV.M.	14.M.	14.74.	14.7.	14.70	14.71	1.40
APG#	160			\$26.10	\$21.31	\$15.72	N.A.	N.A.	\$30.07	N.A.	\$21.50	\$1.36	\$12.58	N.A.
CPT CODE	45300	Proctosigmoidoscopy diagnostic (sep	₹21.45	920.10	921.31	910.72	N.A.	14.A.	430.07	14.M.	1 421.00	+1.50	7.2.50	1

	MEAN	AND STANDARD DEVIATION	FOR IND	IRECT LA	BOK CO	515 BT F/	ACILITY			IL - 30110	IIOAL I II	COLDOIN		
								Indirect La	bor Costs					
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			Vo	lume		ume		lume		ume		ume		lume
			(1000	)-2999)	(3000	-5999)	(60	00+)	(1000	-2999)	(3000	-5999)	(60	00+)
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	45330	Sigmoidoscopy, flexible fiberoptic di	\$26.41	\$40.50	\$12.74	\$8.45	\$4.51	N.A.	\$33.58	\$7.94	\$43.82	\$24.52	\$28.19	\$24.32
CPT CODE	46610	Anoscopy for removal of polyp	\$29.03	\$21.91	\$11.84	\$7.24	N.A.	N.A.	N.A.	N.A.	\$36.62	\$17.05	\$13.16	\$6.68
APG#	161	PROCTOSIGMOIDOSCOPY WITH EX	CISION OR	BIOPSY										
CPT CODE		Sigmoidoscopy, flexible fiberoptic fo	\$30.33	\$42.08	\$11.38	\$10.04	\$5.60	\$1.56	\$24.15	\$3.22	\$30.18	\$15.88	\$31.40	\$26.10
CPT CODE		Sigmoidoscopy, flexible fiberoptic fo	\$35.61	\$41.06	\$15.02	\$17.48	\$6.13	\$1.99	\$48.30	N.A.	\$26.72	\$8.74	\$30.41	\$22.04
APG#	162	DIAGNOSTIC UPPER GASTROINTEST	INAL END	OSCOPY										
CPT CODE	43235	Upper GI endoscopy including esoph	\$26.13	\$24.73	\$15.10	\$15.58	N.A.	N.A.	\$56.45	\$78.60	\$33.39	\$17.79	\$20.17	\$10.53
CPT CODE	43230	Upper GI endoscopy incl. esophagus	\$32.16	\$28.32	\$14.56	\$14.62	N.A.	N.A.	\$62.29	\$78.15	\$38.61	\$15.07	\$32.18	\$21.70
APG#	163	THERAPEUTIC UPPER GASTROINTES	TINAL EN	DOSCOPY										
CPT CODE		Upper GI endoscopy including esoph	\$27.96	\$24.65	\$11.60	\$11.71	N.A.	N.A.	\$39.19	N.A.	\$38.12	N.A.	\$35.86	\$28.25
CPT CODE	43245	Upper GI endoscopy including esoph		\$22.96	\$20.33	\$19.90	N.A.	N.A.	N.A.	N.A.	\$27.68	N.A.	\$52.29	\$49.35
APG#	164	DIAGNOSTIC LOWER GASTROINTES	TINAL FN											
CPT CODE		Colonoscopy, fiberoptic, beyond spl	\$34.50	\$39.56	\$21.35	\$20.88	\$6.08	N.A.	\$76.82	\$117.16	\$40.36	\$34.13	\$32.99	\$22.49
		Colonoscopy, fiberoptic, beyond spl	\$41.73	\$39.36	\$22.28	\$20.19	\$6.08	N.A.	\$86.01	\$128.86	\$48.69	\$29.68	\$47.53	\$35.73
CPT CODE APG#	165	THERAPEUTIC LOWER GASTROINTE												
		Colonoscopy, fiberoptic, beyond spl	\$50.38	\$50.43	\$37.57	\$29.00	\$7.65	N.A.	\$21.15	\$25.51	\$38.12	N.A.	\$36.74	\$25.47
CPT CODE		Colonoscopy, fiberoptic, beyond spl	\$37.98	\$39.53	\$17.23	\$13.25	\$6.08	N.A.	\$77.72	\$112.89	\$47.39	\$30.11	\$35.08	\$21.29
CPT CODE		ERCP & OTHER MISC. GASTROINTE				ES								
APG#	166	Endoscopic retrograde cholangiopan-	\$50.53	\$42.57	\$21.37	\$23.63	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Small intestinal endoscopy beyond s	\$30.82	\$28.67	\$16.35	N.A.	\$7.65	N.A.	N.A.	N.A.	\$32.90	N.A.	\$17.50	\$6.53
CPT CODE	167	TONSIL & ADENOID PROCEDURES	¥30.02	¥20.07	410.00	1454				1				
APG#		Tonsillectomy and adenoidectomy, a	\$43.23	\$38.98	\$29.76	\$25.90	\$14.92	\$5.92	\$108,47	\$139.75	\$74.61	\$44.74	\$66.27	\$58.84
CPT CODE			\$42.65	\$45.60	\$29.76	\$25.90	\$12.79	\$2,94	\$64.31	\$26,80	\$75.83	\$48.19	\$68.53	\$47.08
CPT CODE		Tonsillectomy, primary or secondary HERNIA & HYDROCELE PROCEDURE		045.00	V25.70	420.00	***************************************	12.0	-		1	1		
APG#	168		\$65,17	\$69.10	\$27.68	\$25.52	\$12.21	\$7.04	\$99.93	\$107.53	\$104.52	\$67.35	\$65.30	\$52.22
CPT CODE		Repair inguinal hernia, age 5 or over	\$53.32	\$45.35	\$28.46	\$25.79	\$12.46	\$4.94	\$79.54	\$37.71	\$86.38	\$47.03	\$66.33	\$51.51
CPT CODE		Repair inguinal hernia, any age recur		\$45.35	920.40	420,73	V12.40	V4.04	410101	107177	100.00			
APG#	169	SIMPLE HEMORRHOID PROCEDURES		\$48,99	\$24.33	\$11.37	\$18.62	N.A.	\$50.89	\$22.12	\$61.11	\$37.31	\$63.30	\$53.87
CPT CODE		Excision of external hemorrhoid tags		\$53,38	\$32.17	\$24.08	\$18.62	N.A.	\$66.53	N.A.	\$65.91	\$40.30	\$31.34	\$13.85
CPT CODE		Description of Hemorrhoids, any met SIMPLE ANAL & RECTAL PROCEDU	\$52.94				\$10.0Z	14.74	+00.00	1101	100101			
APG#	170			\$16,19	\$22.96	\$16.26	N.A.	N.A.	N.A.	N.A.	\$35.51	N.A.	\$12.88	N.A.
CPT CODE	45915	Removal of fecal impaction or foreig	\$23.70	\$34.95	\$30.02	\$17.37	\$18.62	N.A.	\$52.86	N.A.	\$55.19	\$39,41	\$55.54	\$45.31
CPT CODE		Fissurectomy, with or without sphin		\$34.95	\$30.02	\$17.37	\$10.02	IV.A.	¥32.00	14.75.	400.10	400111	70010	1.0.0
APG#	171	COMPLEX ANAL & RECTAL PROCES		\$52.94	\$36.59	\$18.66	N.A.	N.A.	\$92.21	\$16.99	\$55.73	\$6,44	\$30,49	\$15.47
CPT CODE		Excision of Rectal tumor, transanal a			\$36.59	\$22.34	\$18.62	N.A.	\$154.46	\$173.54	\$64.72	\$41,45	\$65.08	\$52.81
CPT CODE		Hemorrhoidectomy internal and exte	\$54.63	\$44.67			910.02	IN.M.	\$104,40	V170.54	104.72	441.40	700100	TOZIO
APG#	172	PERITONEAL PROCEDURES & CHAN				\$19.55	\$1.44	\$0.96	N.A.	N.A.	\$22.46	N.A.	\$48,69	\$55,35
CPT CODE		Change of Gastrostomy Tube	\$33.45	\$30.08	\$18.33		\$10.97	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Peritoneocentesis, ebdominal parace	\$35.96	\$34.43	\$37.53	\$35.44	\$10.97	N.A.	IN.A.	N.A.	IN.M.	13.73.	14.0.	111.01
APG#	173	MISC. DIGESTIVE PROCEDURES		105.05	407.40	A10.00	N.A.	N.A.	\$225.56	N.A.	\$22.46	N.A.	\$9.55	N.A.
CPT CODE		Percutaneous placement of gastrost	\$38.99	\$35.66	\$37.13	\$13.26		N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	49421		\$30.99	\$13.81	\$35.03	\$11.96	N.A.	N.A.	N.A.	IV.A.	IV.A.	14.A.	14.A.	- · · · · · ·
APG#	183	SIMPLE URINARY STUDIES & PROC		18.00	10.75		A 4 F -	l NI A	N.A.	N.A.	\$133.78	N.A.	N.A.	N.A.
CPT CODE		Bladder instillation of anticarcinogeni		\$7.23	\$8.77	N.A.	\$4.51	N.A.		N.A.	\$133.78 N.A.	N.A.	N.A.	N.A.
CPT CODE	51725	Simple cystometrogram (CMG) (e.g.,	\$20.03	N.A.	\$11.70	\$2.61	\$4.50	N.A.	N.A.		N.A.	N.A.	N.A.	N.A.
CPT CODE	51736	Simple uroflowmetry (UFR) (e.g., sto	\$20.03	N.A.	\$10.57	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	I IV.A.	IV.M.	14.M.

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								Indirect La	bor Costs					
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				-2999)	(3000	-5999)	(60)	00+)	(1000	-2999)	(3000	-5999)	(600	00+)
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standar
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviatio
APG#	296	COMPLEX ANTERIOR SEGMENT EYE	PROCEDU	RES EXCEP	T FOR GLA	UCOMA								
CPT CODE		Keratoplasty, penetrating, includes a	N.A.	N.A.	\$49.99	N.A.	N.A.	N.A.	\$96.33	\$66.10	\$100.46	\$108.61	\$77.46	\$67.26
CPT CODE		Removal of vitreous, anterior approa	\$36.85	\$25.71	\$39.15	\$32.43	N.A.	N.A.	\$73.30	\$69.31	\$92.41	\$82.84	\$89.43	\$98.83
APG#		SIMPLE POSTERIOR SEGMENT EYE												
CPT CODE		Destruction of localized lesion of reti	N.A.	N.A.	\$32.17	\$39.73	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Destruction of extensive or progressi	N.A.	N.A.	\$60.26	N.A.	N.A.	N.A.	\$44.77	. N.A.	\$30.29	N.A.	N.A.	N.A.
APG#	298	COMPLEX POSTERIOR SEGMENT EY			TOOLEG			111111						
		Vitrectomy, mechanical, pars plana	\$51.48	\$43.51	\$35.94	\$19.87	N.A.	N.A.	\$81.38	\$85.86	\$144.30	\$95.05	\$25.29	\$12.83
CPT CODE		Repair of retinal detachment, one or		N.A.	\$60.26	N.A.	N.A.	N.A.	\$200,49	N.A.	\$344.57	N.A.	\$188.33	N.A.
CPT CODE	299	STRABISMUS & MUSCLE EYE PROC		14./51	400.E0	140.0		111111	1202112					
APG#		Strabismus surgery on patient not pr		\$20.07	\$47.77	\$24.63	N.A.	N.A.	\$65,32	\$40.82	\$59.24	\$42,70	\$28.98	\$13.68
CPT CODE		Strabismus surgery on patient not pr		\$13.51	\$40.59	\$19.15	N.A.	N.A.	\$95.89	\$106.17	\$78.93	\$59,46	\$51.92	\$43.87
CPT CODE		SIMPLE REPAIR & PLASTIC PROCED			V40.55	V15.15	141/41	141741	100100					
APG#			\$36.78	\$28.93	\$26,30	\$18.97	N.A.	N.A.	\$57.19	\$48.31	\$23.85	\$5.85	\$50.09	\$63.63
CPT CODE		Excision of lesion of eye lid without	\$38.86	\$37.81	\$27.94	\$21.69	N.A.	N.A.	\$57.40	\$30.01.	\$88.00	\$45.62	\$75.40	\$79.0
CPT CODE	67921	Repair of entropion suture			927.34	VZ 1.03	IN.A.	14.0.	437.40	V00.01,	+00.00	7 TOTOL	770110	11010
APG#		COMPLEX REPAIR & PLASTIC PROC		\$18.48	\$59.84	\$66.91	\$10.80	N.A.	\$80.16	\$54.35	\$97.01	\$78,19	\$34.02	\$20.46
CPT CODE		Repair of blepharoptosis (tarso)-levat		\$18.48	\$67.55	\$52.49	\$10.80	N.A.	\$121.83	\$62.35	\$138.98	\$122.64	\$46.08	\$23.38
CPT CODE		Dacryocystorhinostomy (fistulization	\$53.53	\$29.70	\$67.55	\$52.49	\$13.94	N.A.	9121.03	702.30	V130.30	V122.04	V40.00	720.00
APG#	313	OTORHINOLARYNGOLOGIC FUNCTION						41.4	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Oscillating tracking test, with record	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.		N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Brainstem evoked response recordin	N.A.	N.A.	N.A. *	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	IV.A.	N.A.	14.74.
APG#	314	MAJOR EXTERNAL EAR PROCEDUR									100.00	N.A.	\$14.00	N.A.
CPT CODE	69140	Excision exostosis (es), external audi		\$24.64	\$31.01	\$17.15	\$16.07	N.A.	\$57.41	N.A.	\$32.90			N.A.
CPT CODE	69310	Reconstruction of external auditory	\$42.01	\$31.78	\$41.50	\$2.31	N.A.	N.A.	N.A.	N.A.	\$45.96	N.A.	\$271.66	N.A.
APG#	315	TYMPANOSTOMY & OTHER SIMPLE	MIDDLE E											
CPT CODE	69420	Myringotomy including aspiration an	\$31.00	\$28.28	\$25.10	\$9.58	\$9.31	\$2.35	\$95.31	\$72.93	\$49.06	\$26.31	\$35.88	\$24.86
CPT CODE	69433	Tympanostomy (requiring insertion o	\$15.38	\$4.76	\$29.45	N.A.	\$10.97	N.A.	\$18.08	\$14.44	\$35.49	\$35.23	\$43.70	\$34.5
APG#	316	TYMPANOPLASTY & OTHER COMPL	EX MIDDL	E EAR PROC	CEDURES									
CPT CODE	69631	Tympanoplasty w/o mastoidectomy	\$50.02	\$19.37	\$44.63	\$30.67	\$33.92	N.A.	\$329.39	\$298.26	\$45.44	\$11.82	\$132.15	\$117.2
CPT CODE	69660	Stapedectomy with re-establishment	\$54.28	\$10.22	\$173.46	\$116.51	\$33.92	N.A.	N.A.	N.A.	\$69.46	N.A.	\$163.49	\$204.0
APG#		INNER EAR PROCEDURES												
CPT CODE		Endolymphatic sac operation; with s	\$66.61	N.A.	\$70.53	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE ·		Revision fenestration operation	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	\$29.07	N.A.	N.A.	N.A.
APG#	318	SIMPLE AUDIOMETRY				1								
CPT CODE		Basic comprehensive audiometry	\$14.62	N.A.	\$1.83	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Tympanometry	N.A.	N.A.	\$0.47	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	319	REMOVAL OF IMPACTED CERUMEN			1						1			
CPT CODE		Removal impacted cerumen (separat	\$13.35	\$11.00	\$22.60	N.A.	\$10.97	N.A.	\$30.07	N.A.	\$29.31	\$17.08	\$25.08	\$25.1
	FOR ALL 61	JRGICAL PROCEDURES	\$39.54	\$35.28	\$32.46	\$23.03	\$13.38	\$7.43	\$96.93	\$90.08	\$65.95	\$49.28	\$49.03	\$43.9

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	MEAN AN	ND STANDARD DEVIATION FO	R INDIR	ECT EQUI	PMENT C	COSTS BY					RGICAL	PROCEDU	JRES	
								ndirect Equi	pment Cost	ts				
						spital						s.c.		
				lume		lume		ume		ume		lume		ume
			(1000	)-2999)	(3000	-5999)	(600	00+)	(1000	-2999)	(3000	)-5999)	(60)	00+)
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	15100	Split graft, trunk, scalp, arms, legs,	\$71.19	\$24.80	\$59.71	\$11.96	\$91.20	\$0.00	\$39.90	\$8.06	\$58.52	\$15.65	\$47.50	\$2.69
CPT CODE	15260	Full thickness graft, free, including d	\$79.80	\$0.00	\$79.80	\$0.00	\$83.60	\$10.75	\$79.80	N.A.	\$73.47	\$10.93	\$74.10	\$8.06
APG#	27	SIMPLE INCISION & EXCISION OF BR												
CPT CODE	19101	Biopsy of breast, incisional	\$35.61	\$7.44	\$39.09	\$2.76	\$41.04	\$8.11	\$38.00	\$0.00	\$37.05	\$6.34	\$37.75	\$4.47
CPT CODE	19120	Excision or cyst, fibroadenoma, or ot	\$41.33	\$8.48	\$48.69	\$8.69	\$45.60	\$7.21	\$40.17	\$6.89	\$42.18	\$7.69	\$43.70	\$4.65
APG#	28	<b>BREAST RECONSTRUCTION &amp; MAST</b>	ECTOMY			1								
CPT CODE	19140	Mastectomy for gynecomastia throu	\$59.28	\$16.41	\$59.28	\$18.14	\$55.73	\$11.61	\$47.88	\$7.52	\$49.78	\$5.56	\$53.20	\$14.22
CPT CODE	19160	Mastectomy, partial	\$70.93	\$41.26	\$63.51	\$20.66	\$68.40	\$22.80	\$43.70	\$18.81	\$61.26	\$27.68	\$55.73	\$13.35
CPT CODE	19182	Mastectomy, subcutaneous	\$48.51	\$9.97	\$54.72	\$20.39	\$53.20	\$13.16	\$45.60	N.A.	\$64.60	\$17.41	\$51.30	\$8.06
APG#	53	OCCUPATIONAL THERAPY												
CPT CODE	97540	Training in activities of daily living (s	\$28.50	\$8.06	\$34.20	\$16.12	\$36.48	\$21.96	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	97541	Training in activities of daily living (s	\$22.80	N.A.	N.A.	N.A.	\$19.76	\$14.41	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	54	PHYSICAL THERAPY												
CPT CODE	97010	Physical medicine treatment to one	\$22.80	N.A.	\$15.20	N.A.	\$20.46	\$5.95	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	97128	Physical medicine treatment to one	\$15.20	N.A.	\$15.20	N.A.	\$17.10	\$9.09	N.A.	N.A	N.A.	N.A.	N.A.	N.A.
APG#	55	DIAGNOSTIC ARTHROSCOPY										1		
CPT CODE	29815	Arthroscopy, shoulder, diagnostic, w		\$15.67	\$57.63	\$37.26	\$79.80	\$16.12	\$49.40	\$17.41	\$45.60	\$11.40	\$53.20	\$26.87
CPT CODE	29870	Arthroscopy, knee, diagnostic, with	\$43.51	\$17.39	\$39.62	\$7.28	\$57.00	\$11.40	\$43.70	\$15.97	\$42.28	\$13.54	\$63.84	\$25.97
APG#	56	THERAPEUTIC ARTHROSCOPY												
CPT CODE	29877	Arthroscopy, knee, surgical debride	\$51.21	\$14.70	\$45.11	\$4.27	\$52.57	\$9.13	\$45.35	\$10.09	\$45.49	\$5.83	\$63.71	\$23.18
CPT CODE	29881	Arthroscopy, knee, surgical with me	\$64.22	\$37.68	\$50.77	\$10.88	\$65.87	\$21.32	\$59.53	\$7.91	\$58.43	\$16.62	\$64.98	\$25.34
APG#	57	REPLACEMENT OF CAST												
CPT CODE	29075	Application elbow to finger (short ar	\$22.80	\$0.00	\$19.00	\$7.60	\$31.67	\$15.36	\$22.80	\$0.00	\$15.20	N.A.	\$22.80	\$0.00
CPT CODE	29405	Application	\$22.80	\$0.00	\$29.13	\$14.39	N.A.	N.A.	\$22.80	\$0.00	\$19.00	\$5.37	\$22.80	N.A.
APG#	58	SPLINT, STRAPPING & CAST REMOV	/AL											
CPT CODE	29125	Application of short arm splint (forea		\$0.00	\$19.00	\$5.37	\$51.30	\$24.18	\$22.80	\$0.00	\$19.00	\$5.37	\$22.80	\$0.00
CPT CODE	29580	Strapping unna boot	\$15.20	N.A.	\$22.80	N.A.	\$11.40	N.A.	\$7.60	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	59	TREATMENT OF CLOSED FRACTURE	& DISLO	CATION OF		DE & RIS		l					1	
CPT CODE	21800	Treatment of rib fracture, closed, un	\$22.80	\$10.75	\$19.00	\$6.58	\$45.60	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	26720	Treatment of closed phalangeal shaf	\$20.27	\$1.96	\$23.89	\$6.09	\$26.60	\$10.75	\$19.00	N.A.	\$20.90	\$3.80	\$20.90	\$2.69
APG#	60	TREATMENT OF CLOSED FRACTURE	& DISLO	CATION EXC	CEPT FINGE	R, TOE & R								
CPT CODE	25600	Treatment of closed distal radial frac	\$30.07	\$4.47	\$35.97	\$8.53	\$33.44	\$1.07	\$23.94	\$12.36	\$33.69	\$11.43	\$32.68	\$0.00
CPT CODE	25605			\$4.65	\$24.07	\$3.10	\$28.50	\$8.06	\$28.50	\$8.06	\$23.75	\$7.83	\$22.80	\$0.00
CPT CODE		Treatment of closed metatarsal fract	\$22.80	\$0.00	\$20.22	\$14.48	\$28.50	\$8.06	\$34.20	N.A.	\$19.00	\$5.37	\$19.00	\$5.37
APG#	62	TREATMENT OF OPEN FRACTURE &	DISLOCA	TION EXCEP	T FACE									
CPT CODE	25615	Treatment of open distal radial fract	\$66.77	\$10.26	\$69.16	\$1.70	\$136.80	N.A.	N.A.	N.A.	\$68.40	\$0.00	\$68.40	N.A.
CPT CODE		Open treatment of closed or open di	\$71.66	\$1.44	\$67.77	\$10.86	\$51.30	\$8.06	\$76.00	N.A.	\$55.10	\$22.69	\$72.20	\$0.00
CPT CODE		Open treatment of closed or open ph		\$11.13	\$65.14	\$8.62	\$62.70	\$8.06	\$68.40	N.A.	\$65.21	\$8.44	\$68.40	\$0.00
APG#	63	JOINT MANIPULATION UNDER ANES												
CPT CODE	23700	Manipulation under anesthesia, shou		\$0.00	\$22.80	\$0.00	\$34.20	N.A.	\$21.28	\$14.56	\$27.27	\$16.98	\$22.80	\$0.00
CPT CODE	27570	Manipulation of knee joint under gen	\$22.80	\$0.00	\$22.80	\$0.00	\$34.20	\$16.12	\$22.80	N.A.	\$30.40	\$16.99	\$22.80	\$0.00
APG#	64	SIMPLE MAXILLOFACIAL PROCEDUR	RES											
CPT CODE	30000	Drainage of hematoma, nasal, intern	\$31.92	\$8.33	\$29.77	\$7.76	\$34.20	N.A.	\$26.60	N.A.	\$26.60	\$0.00	\$26.60	\$0.00
CPT CODE		Excision, nasal polyp(s), simple unila	\$37.24	\$18.69	\$39.43	\$14.21	\$45.60	N.A.	\$34.20	N.A.	\$42.75	\$16.53	\$22.80	\$0.00
CPT CODE		Excision, nasal polyp(s), simple bilat	\$38.76	\$6.24	\$50.35	\$17.44	\$45.60	N.A.	\$34.20	N.A.	\$38.00	\$6.58	\$34.20	\$0.00

								ndirect Equi	pment Cos	ts				
					Ho	spital					Α.:	s.c.		
			Vn	lume		lume	Vo	lume	Vo	lume	Vol	ume	Vo	lume
				-2999)		)-5999)	(60	00+)	(1000	)-2999)	(3000	-5999)	(60	100+)
SURGICAL			1.44	Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES	-	APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	21020	Sinusotomy, maxillary (antrotomy); i		\$16.49	\$63.51	\$26.21	\$39.90	\$8.06	\$34.58	\$16.66	\$58.90	\$21.86	\$76.51	\$38.01
APG#	65	COMPLEX MAXILLOFACIAL PROCED		410110									-	
CPT CODE		Septoplasty or submucous resection		\$0.00	\$61.56	\$7.56	\$66.31	\$3,69	\$62.62	\$15.97	\$59.38	\$8.11	\$79.90	\$36.05
CPT CODE		Reconstruction, functional, internal	\$66.50	\$2.19	\$67.86	\$19.55	\$73.47	\$15.82	\$75.24	\$15.05	\$67.73	\$6.05	\$73.47	\$15.36
APG#	66	INCISION OF BONE, JOINT, & TENDO												
CPT CODE		Tendon sheath incision at radial styl	\$34.20	\$7.21	\$34.20	\$0.00	\$45.60	\$11.40	\$32.30	\$6,58	\$29.30	\$5.83	\$38.00	\$5.89
CPT CODE		Capsulotomy for contracture; metat	\$50.49	\$22.66	\$52.11	\$32.37	\$45.60	N.A.	\$46.93	\$16.04	\$41.80	\$6.58	\$39.90	\$8.06
APG#	67	BUNION PROCEDURES	V 30.40	¥22.00	VOLITI	102101								
			\$51.25	\$14.76	\$45.93	\$7.77	\$68,40	\$0.00	\$49.86	\$12,70	\$55.48	\$20.60	\$53,20	\$9.31
CPT CODE		Hallux valgus (bunion) correction, wi Hallux valgus (bunion) correction, wi	\$49.78	\$9.94	\$51.68	\$10.75	\$68.40	\$0.00	\$47.69	\$6.25	\$58.82	\$14.18	\$58.90	\$22,13
CPT CODE	68	EXCISION OF BONE, JOINT & TENDO				*10.73	700.40	70.00	7.7.100	10.20		,		1
APG#		Excision or lesion of tendon sheath o		\$9.46	\$35.06	\$6.61	\$41.80	\$13.16	\$30.86	\$5,39	\$31.92	\$5.37	\$36.48	\$5.76
CPT CODE				\$8.50	\$40.85	\$4.43	\$45.60	\$0.00	\$41.17	\$3.74	\$41.80	\$3.80	\$44.84	\$6.80
CPT CODE		Excision of interdigital (Morton) neur EXCISION OF BONE , JOINT & TEND				44.45	V40.00	¥0.00	441117	10171	111100	10.00		13122
APG#	69		\$31.67	\$3.10	\$39.27	\$7,47	\$45.60	\$0.00	\$30.40	N.A	\$33.14	\$8.09	\$43.57	\$12,29
CPT CODE		Excision, olecranon bursa		\$6.80	\$36.73	\$10,10	\$45.60	N.A.	\$30.40	\$0.00	\$42.89	\$17.65	\$44.33	\$20.93
CPT CODE		Excision of synovial cyst of popiteal	\$33.44	96.60	\$30.73	\$10.10	\$40.00	IV.A.	730,40	₩0.00	V42.00	V17.00	744.00	720100
APG#	70	ARTHROPLASTY	FO 224	\$18.47	\$45.60	\$13.96	\$51.30	\$8.06	\$22.80	N.A.	\$42.56	\$9,46	\$45.60	N.A.
CPT CODE		Interposition arthroplasty, intercarpal	\$55.37	\$4.06	\$44.08	\$13.60	\$49.40	\$6.58	N.A.	N.A.	\$34.50	\$5.93	\$40.85	\$3.64
CPT CODE		Arthroplasty interphalangeal joint; si	\$41.20	\$4.00	944.00	\$13.00	343.40	70.00	14.70.	14.0.	V34.00	40.55	740.00	70.01
APG#	71	HAND & FOOT TENOTOMY	405.00	47.07	\$34.20	\$0.00	\$41.80	\$13,16	\$34.20	\$0.00	\$33.57	\$6.09	\$37.05	\$5.70
CPT CODE		Tenotomy, flexor, single, finger ope	\$35.83	\$7.87		\$6.24	\$45.60	N.A.	\$38.00	N.A.	\$55.10	\$33,05	\$34.20	\$0.00
CPT CODE		Tenotomy, open, extensor, foot or t		\$8.06	\$41.04	\$6.24	\$45,60	N.A.	\$30.00	IV.A.	\$55.10	\$33.00	934.20	70.00
APG#	72	SIMPLE HAND & FOOT REPAIR EXCE				44.00	400.44	\$4.95	\$31.35	\$1.90	\$26.90	\$6.13	\$34.20	\$6.58
CPT CODE		Tendon sheath incision for trigger fin		\$6.34	\$32.84	\$4.85	\$33.44	\$0.00	\$44.97	\$1.55	\$44.95	\$1.72	\$47.50	\$12.60
CPT CODE		Hammertoe operation, one tow (e.g.	\$55.10	\$18.26	\$46.41	\$3.05	\$45.60	\$0.00	\$44.97	\$1.55	\$44.95	91.72	\$47,50	\$12.00
APG#	73	COMPLEX HAND & FOOT REPAIR								1000	100.51	110.10	450.50	\$12.22
CPT CODE		Arthrodesis, interphalangeal joint; wi		\$7.18	\$65.14	\$1.44	\$60.80	\$5.37	\$70.30	\$8.06	\$63.51	\$19.46	\$59.53	\$50.60
CPT CODE		Amputation, metatarsal, with toe, si	\$26.60	\$0.00	\$37.16	\$9.46	\$39.90	\$8.06	\$26.60	N.A.	\$29.45	\$5.70	\$59.53	\$50.60
APG#	74	REPAIR, EXCEPT ARTHROTOMY, OF									1	110 70	100.10	
CPT CODE		Repair of complete shoulder (rotator)		\$18.62	\$72.20	\$6.58	\$136.80	N.A.	\$91.20	N.A.	\$76.42	\$13.76	\$68.40	N.A.
CPT CODE		Repair, tendon or muscle, flexor, for	\$61.94	\$25.27	\$49.40	\$15.01	\$53.96	\$4.30	\$34.20	\$5.37	\$51.35	\$27.03	\$40.53	\$4.39
APG#	75	ARTHROTOMY EXCEPT OF HAND &									110.10	45.00	170.00	140.40
CPT CODE		Arthrotomy, knee, for excision of se	\$50.16	\$10.20	\$50.16	\$10.20	\$57.00	\$16.12	N.A.	N.A.	\$49.40	\$5.37	\$79.80	\$16.12
CPT CODE	27333	Arthrotomy, knee, for excision of se	\$42.81	\$4.73	\$62.70	\$11.40	\$68.40	N.A.	N.A.	N.A.	\$57.00	\$16.12	\$79.80	\$16.12
APG#	76	ARTHROCENTESIS & LIGAMENT OR												
CPT CODE		Injection, tendon sheath, ligament, t		\$5.80	\$20.90	\$18.81	\$34.20	N.A.	\$15.20	\$6.58	\$43.07	\$26.69	\$19.00	\$13.16
CPT CODE		Arthrocentesis, aspiration and/or inje		\$12.29	\$23.89	\$6.62	\$36.10	\$2.69	\$24.32	N.A.	\$27.36	\$4.30	\$23.56	\$1.07
CPT CODE	20610	Arthrocentesis, aspiration and/or inje	\$24.32	\$0.00	\$22.58	\$3.33	\$34.20	N.A.	N.A.	N.A.	\$24.32	\$0.00	\$23.56	\$1.07
APG#	77	SPEECH THERAPY												
CPT CODE		Speech, language or hearing therapy		\$11.40	\$28.88	\$5.27	\$30.78	\$1.61	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	92508	Speech, language or hearing therapy	N.A.	N.A.	\$31.92	\$0.00	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	79	PULMONARY TEST & THERAPY EXC											:	
CPT CODE	94650	Intermittent positive pressure breathi		N.A.	\$15.20	\$0.00	\$17.10	\$2.19	N.A.	N.A.	N.A.	N.A.	N.A.ı	N.A.
CPT CODE	94760	Noninvasive ear or pulse oximetry fo	\$3.80	\$0.00	\$5.07	\$2.19	\$10.77	\$4.67	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	80	NEEDLE & CATHETER BIOPSY, ASPI.	RATION, L	AVAGE & IN	ITUBATIO	V								

r	AEAN A	ND STANDARD DEVIATION FO	RINDIR	ECT EQUI	PMENT C	OSTS BY					RGICAL	PROCEDU	JRES	
								ndirect Equi	pment Cos	ts				
						pital						s.c.		
				lume		ume		ume		lume		lume		lume
			(1000	0-2999)	(3000	-5999)	(60)	00+)	(1000	-2999)	(3000	-5999)	(60	00+)
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standar
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE		Thoracentesis, puncture or pleural c	\$31.92	\$5.10	\$32.30	\$4.65	N.A.	N.A.	N.A.	N.A.	\$34.20	N.A.	N.A.	N.A.
CPT CODE	32405	Biopsy, lung or mediastinum, percut	\$43.07	\$4.39	\$41.80	\$17.41	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	81	SIMPLE ENDOSCOPY OF THE UPPER	AIRWAY									<u> </u>		
CPT CODE		Laryngoscopy, indirect (separate pro		\$7.28	\$19.00	\$4.16	\$28.50	\$8.06	\$15.20	N.A.	\$24.57	\$16.24	\$19.00	\$5.37
CPT CODE	31510	Laryngoscopy, indirect (separate pro		\$7.24	\$19.54	\$5.98	\$28.50	\$8.06	\$15.20	N.A.	\$24.57	\$16.24	\$19.00	\$5.37
APG#	82	COMPLEX ENDOSCOPY OF THE UPP	ER AIRWA											
CPT CODE		Laryngoscopy, direct, operative with		\$4.02	\$32.57	\$5.75	\$30.40	\$6.58	\$32.30	\$2.69	\$31.03	\$1.55	\$28.88	\$2.63
CPT CODE	31541	Laryngoscopy, direct, operative, wit		\$1.55	\$45.06	\$24.08	\$34.20	\$0.00	\$36.10	\$2.69	\$41.04	\$14.82	\$27.87	\$10.97
APG#	83	SIMPLE ENDOSCOPY OF THE LOWER												
CPT CODE		Bronchoscopy diagnostic, (flexible or		\$5.75	\$31.59	\$3.86	\$29.64	\$4.16	\$29.13	\$5.80	\$34.20	\$7.60	\$30.40	N.A.
CPT CODE	31625	Bronchoscopy with biopsy	\$32.93	\$7.11	\$34.71	\$3.17	\$31.92	\$5.10	\$34.20	N.A.	\$32.30	\$2.69	\$34.20	N.A.
APG#	84	COMPLEX ENDOSCOPY OF THE LOV	VER AIRW											
CPT CODE	31628	Bronchoscopy w/ transbronchial lun	\$34.20	\$0.00	\$37.05	\$7.09	\$31.35	\$5.70	\$34.20	N.A.	\$45.60	N.A.	N.A.	N.A.
CPT CODE	31629	Bronchoscopy with transbronchial n	\$34.20	\$0.00	\$37.05	\$5.70	\$34.20	\$16.12	N.A.	N.A.	\$34.20	N.A.	N.A.	N.A.
APG#	85	NASAL CAUTERIZATION & PACKING								- 2				
CPT CODE	30901	Control nasal hemorrhage, anterior,	\$30.40	\$0.00	\$25.84	\$10.20	\$32.93	\$2.19	\$21.28	N.A.	\$30.40	\$0.00	\$30.40	N.A.
CPT CODE	30903	Control nasal hemorrhage, anterior,	\$30.40	\$0.00	\$26.60	\$8.50	\$34.20	\$0.00	N.A.	N.A.	\$38.95	\$17.10	\$30.40	N.A.
APG#	86	SIMPLE LIP, MOUTH & SALIVARY GI	AND PRO	CEDURES										
CPT CODE	41110	Excision of lesion of tongue without	\$34.20	\$7.60	\$30.40	\$0.00	\$32.30	\$2.69	\$41.80	N.A.	\$26.60	\$6.58	\$38.00	\$10.75
CPT CODE	41112	Excision of lesion of tongue with clo	\$34.20	\$10.41	\$33.57	\$8.47	\$32.30	\$2.69	N.A.	N.A.	\$22.80	\$5.37	\$36.10	\$13.44
APG#	87	COMPLEX LIP, MOUTH, & SALIVARY	GLAND F									1		
CPT CODE	40500	Vermilionectomy (lip shave), mucosa	\$37.05	\$5.70	\$38.00	\$6.58	\$45.60	N.A.	N.A.	N.A.	\$38.00	\$5.37	\$34.20	\$0.00
CPT CODE	42410	Excision of parotid tumor or parotid	\$85.99	\$19.82	\$87.78	\$30.72	N.A.	N.A.	\$59.28	N.A.	\$43.70	\$29.56	\$63.84	\$6.45
APG#	88	MISCELLANEOUS SINUS, TRACHEA	& LUNG											
CPT CODE	31030	Sinusotomy, maxillary (antrotomy); r	\$61.75	\$13.30	\$71.11	\$10.46	\$57.00	\$16.12	\$68.40	N.A.	\$65.36	\$4.95	\$86.64	\$24.13
CPT CODE	31200	Ethmoidectomy intranasal, anterior	\$57.00	\$0.00	\$60.33	\$10.04	\$68.40	N.A.	\$57.00	N.A.	\$62.95	\$7.14	\$68.65	\$11.78
APG#	105	EXERCISE TOLERANCE TESTS												
CPT CODE	93015	Cardiovascular stress test using max	\$30.40	\$21.50	\$38.00	\$13.16	\$50.67	\$5.80	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	93017	Cardiovascular stress test using max	\$45.60	N.A.	\$34.20	\$16.12	\$30.40	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	106	ECHOCARDIOGRAPHY												
CPT CODE	93307	Echocardiography, real-time with im	\$34.20	\$0.00	\$30.40	\$6.58	\$47.50	\$15.36	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Doppler echocardiography, pulsed w	\$11.40	\$0.00	\$15.20	\$6.58	\$14.25	\$3.64	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	108	CARDIAC ELECTROPHYSIOLOGIC TE	STS											
CPT CODE		Cardioversion, elective, electrical co		N.A.	N.A.	N.A.	\$82.08	\$61.60	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	93618	Induction of arrhythmia by electrical	\$91.20	N.A.	N.A.	N.A.	\$83.60	\$10.75	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	109	VASCULAR CANNULATION WITH NE	EDLE & C	ATHETER	_									
CPT CODE	36489	Placement of central venous cathete		\$12.20	\$43.32	\$11.59	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	\$49.40	N.A.
CPT CODE		Cannula declotting without balloon c	N.A.	N.A.	\$54.15	\$30.14	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	110	DIAGNOSTIC CARDIAC CATHETERIZ	ATION											
CPT CODE	93547	Combined left heart catheterization,	\$45.60	N.A.	N.A.	N.A.	\$53.20	\$15.20	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Combined right and left heart cathet	\$57.00	N.A.	N.A.	N.A.	\$98.80	\$57.13	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	111	ANGIOPLASTY & TRANSCATHETER	PROCEDU	RES										
CPT CODE		Percutaneous transluminal angioplas	N.A.	N.A.	N.A.	N.A.	\$80.43	\$39.49	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Percutaneous transluminal coronary	\$182.40	N.A.	\$182.40	N.A.	\$150.73	\$54.85	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#		PACEMAKER INSERTION & REPLACE												

	1							Indirect Equi	pment Cos	ts				
					Hos	pital					Α.	s.c.		
			Vol	ume	Vol	ume	Vo	lume	Vol	lume	Vo	lume	Vo	lume
				-2999)	(3000	-5999)	(60	00+)	(1000	-2999)	(3000	)-5999)	(60	100+1
SURGICAL			1.22	Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	51720	Bladder instillation of anticarcinogeni	\$26.60	\$5.37	\$22.80	\$0.00	\$22.80	\$0.00	N.A.	N.A.	\$34.20	N.A.	N.A.	N.A.
CPT CODE		Simple cystometrogram (CMG) (e.g.,	\$22.80	N.A.	\$26.60	\$13.16	\$30.40	\$0.00	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Simple uroflowmetry (UFR) (e.g., sto		N.A.	\$15.20	\$0.00	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	184	RENAL EXTRACORPOREAL SHOCK V												
CPT CODE		Lithotripsy, extracorporeal shock wa		\$0.00	\$57.00	N.A.	N.A.	N.A.	N.A.	N.A.	\$83.60	\$21.50	N.A.	N.A.
APG#	185	URINARY CATHETERIZATION & DILA		10.00	101100									
CPT CODE		Aspiration of bladder; by trocar or in	\$30.40	\$10.75	\$29.45	\$13.30	\$45.60	N.A.	N.A.	N.A.	\$41.80	N.A.	N.A.	N.A.
CPT CODE		Dilation of female urethra including s	\$21.53	\$4.39	\$19.76	\$1.70	\$22.80	N.A.	N.A.	N.A.	\$19.00	\$0.00	\$19.00	N.A.
CPT CODE		Catheterization, urethra simple	\$10.13	\$5.80	\$9.50	\$4.91	\$7.60	N.A.	N.A.	N.A.	\$3.80	N.A.	\$7.60	N.A.
APG#		HEMODIALYSIS	*10110	10.00	1,0.00			1						
CPT CODE		Hemodialysis procedure with single	N.A.	N.A.	\$273.60	N.A.	\$216.60	\$80.61	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Hemodialysis procedure requiring rep	N.A.	N.A.	N.A.	N.A.	\$273.60	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	187	PERITONEAL DIALYSIS												
CPT CODE		Dialysis procedure other than hemod	N.A.	N.A.	N.A.	N.A.	\$364.80	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Dialysis procedure other than hemod	N.A.	N.A.	N.A.	N.A.	\$752.40	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	188	SIMPLE CYSTOURETHROSCOPY												
CPT CODE		Cystourethroscopy (separate proced	\$24.32	\$3.40	\$24.23	\$5.70	\$31.35	\$17.10	\$19.00	\$5,37	\$22.80	\$0.00	\$25.08	\$5.10
CPT CODE		Cystourethroscopy, with calibration	\$33.44	\$6.80	\$32.30	\$6.58	\$30.40	\$4.65	N.A.	N.A.	\$29.18	\$2.72	\$31.67	\$2.19
APG#	189	COMPLEX CYSTOURETHROSCOPY 8			102.02		-			1				
CPT CODE		Cystourethroscopy, w/ fulguration or		\$0.00	\$34.74	\$7.42	\$34.20	\$16.12	\$30.40	N.A.	\$27.21	\$4.04	\$34.20	N.A.
CPT CODE		Cystourethroscopy, w/fulguration an	\$30.40	\$0.00	\$33.62	\$8.19	\$35.15	\$7.19	\$38.00	\$10.75	\$30.40	\$0.00	\$38.00	N.A.
APG#	190	PERCUTANEOUS RENAL ENDOSCOP												
CPT CODE		Introduction of intracatheter or cath	\$53.96	\$36.07	\$45.60	N.A.	\$38.00	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Introduction of ureteral catheter or s	\$46.97	\$16.41	\$50.35	\$9.50	\$68,40	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Ureteral endoscopy through establis	\$45.60	\$0.00	\$47.50	\$3.80	\$57.00	N.A.	N.A.	N.A.	\$22.80	N.A.	N.A.	N.A.
APG#	191	CYSTOTOMY												
CPT CODE		Cystotomy or cystostomy; with fulg	\$37.81	\$4.94	\$40.28	N.A.	\$38.00	N.A.	N.A.	N.A.	\$40.28	N.A.	N.A.	N.A.
CPT CODE		Cystostomy; cystotomy with draina	\$31.54	\$11.85	\$43.83	\$3.07	\$41.80	N.A.	N.A.	N.A.	\$28.50	\$8.06	N.A.	N.A.
CPT CODE		Cystostomy w/insertion of ureteral c	\$38.30	\$4.42	\$59.03	\$27.99	\$41.80	N.A.	N.A.	N.A.	\$40.28	\$0.00	N.A.	N.A.
APG#	192	SIMPLE URETHRAL PROCEDURES												
CPT CODE		Biopsy of urethra	\$33.57	\$7.76	\$30.40	\$0.00	\$45.60	N.A.	\$30.40	N.A.	\$30.40	\$0.00	N.A.	N.A.
CPT CODE		Excision or fulguration; urethral, car	\$30.94	\$1.44	\$30.40	\$0.00	\$30,40	N.A.	\$30.40	N.A.	\$29.13	\$2.19	N.A.	N.A.
APG#	193	COMPLEX URETHRAL PROCEDURES												
CPT CODE		Excision or fulguration of carcinoma	\$34.20	\$7,60	\$37.05	\$13.30	\$30.40	N.A.	N.A.	N.A.	\$34,20	\$5.37	N.A.	N.A.
CPT CODE		Excision of urethral diverticulum (se	\$43.32	\$7,41	\$45.60	\$12.41	\$45.60	N.A.	N.A.	N.A.	\$26.60	N.A.	N.A.	N.A.
APG#	209	TESTICULAR EPIDIDYMAL PROCEDU												
CPT CODE		Orchiectomy, simple, w/ or w/o testi		\$3,10	\$50.03	\$21.28	\$47.50	\$13.44	\$39.90	\$9.56	\$38.00	\$0.00	\$39.90	\$3.80
CPT CODE		Orchiectomy, simple w/ or w/o testi	\$42,34	\$11.49	\$64.60	\$20,11	\$47.50	\$13.44	N.A.	N.A.	\$41.80	\$5.37	\$43.70	\$11.40
APG#	210	INSERTION OF PENILE PROSTHESIS			1									T
CPT CODE		Insertion of penile prosthesis; non-in	\$83.22	\$9.24	\$82.84	\$11.82	\$136.80	N.A.	N.A.	N.A.	\$73.97	\$17.49	N.A.	N.A.
CPT CODE		Insertion of inflatable (multi-compon	\$80.56	\$9.25	\$119.70	\$24.18	\$136.80	N.A.	N.A.	N.A.	\$79.80	\$24.37	N.A.	N.A.
APG#	211	COMPLEX PENILE PROCEDURES		1									1	
CPT CODE	54402		\$34.20	\$0.00	\$129.20	\$10.75	\$45.60	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Removal, repair or replacement of in	\$48.13	\$24.13	\$114.00	\$32.24	\$34.20	N.A.	N.A.	N.A.	\$38.00	\$6.58	N.A.	N.A.
APG#	212	SIMPLE PENILE PROCEDURES						T						

## MEAN AND STANDARD DEVIATION FOR INDIRECT EQUIPMENT COSTS BY FACILITY TYPE AND VOLUME - SURGICAL PROCEDURES Indirect Equipment Costs A.S.C. Hospital Volume Volume Volume (6000+1 (1000-2999) (6000+1 (1000-2999) (3000-5999) (3000-5999) SURGICAL Standard Standard Standard Standard Standard Standard PROCEDURES APG AND CPT DESCRIPTION Mean Deviation Mean Deviation Mean Deviation Deviation Mean Deviation Deviation \$34.20 62225 Replacement or irrigation, ventricular N.A N.A. CPT CODE 63744 Replacement, irrigation or revision of N.A. \$95.00 \$68.40 NΛ NΛ NΔ NΔ 266 NERVE INJECTION & STIMULATION APG# CPT CODE 64510 Injection, anesthetic agent; stellate \$22.80 \$21,53 \$8.78 NΑ NΑ \$2.19 \$27.55 \$22.80 \$0.00 N.A. CPT CODE 64520 Injection, anesthetic agent; lumbar o \$15.20 \$6,58 \$28.50 \$8.06 \$39.90 \$40.31 \$34.20 NΔ \$28.50 \$8.06 \$22.80 \$0.00 APG# 267 REVISION & REMOVAL OF NEUROLOGICAL DEVICE CPT CODE 63660 Revision or removal of spinal neurost N.A. NΔ \$45.60 ΝΔ \$62.70 \$8.06 N.A N.A. \$22.80 N.A. NA. N.A. CPT CODE 63688 Revision or removal of spinal neurost \$45.60 NA \$45.60 \$60.80 N.A. N.A. \$45.60 N.A. N.A. N.A. 268 NEUROSTIMULATOR AND VENTRICULAR SHUNT IMPLANTATION \$68,40 CPT CODE 63650 Percutaneous implantation of neuros \$91.20 N.A. N.A N.A. N.A. N.A. N.A. N.A N.A \$68.40 NΛ ΝΔ NΔ \$49.40 64560 Percutaneous implantation of neuros CARPAL TUNNEL RELEASE CPT CODE 64721 Neuroplasty and/or transposition; me \$51.98 \$10.58 \$43.67 \$50.92 \$11.90 \$41.80 \$11.08 \$35.83 \$10.00 \$45.09 \$9.57 270 NERVE REPAIR & DESTRUCTION 64718 Neuroplasty and/or transposition uln \$66.12 CPT CODE \$14.86 \$57.63 \$62.70 \$8.06 \$61.18 \$23.56 \$66.50 \$27.38 \$53.20 \$5.37 CPT CODE 64719 Neuroplasty and/or transposition; uln \$81.07 \$65.50 \$52.44 \$9.46 \$62.70 \$8.06 \$45.60 \$32.24 \$48.77 \$15.65 \$57.00 \$10.05 COMPLEX NERVE REPAIR \$57.00 64831 Suture of digital perve, hand or foot: \$53.20 \$13.16 \$71.44 \$16.87 \$51.30 \$8.06 \$34.20 N.A. \$48.45 \$16.12 64834 Suture of one nerve, hand or foot: c \$57.00 \$16.12 \$72.96 \$16.87 \$51.30 \$8.06 \$45.60 N.A. \$48 13 \$57.00 \$16.12 CPT CODE 272 SPINAL TAP \$0.00 62270 Spinal puncture, lumbar, diagnostic \$22.80 \$16.72 N.A. ΝΔ ΝΔ N.A. ΝΔ ΝΔ NΔ \$19.00 \$5.37 \$30.40 CPT CODE 62272 Spinal puncture, therapeutic, for drail ΝΔ NΑ ΝΔ NΔ ΝΔ NΔ NΔ NΔ 287 MINOR OPTHALMOLOGICAL TESTS & PROCEDURES CPT CODE 92235 Ophthalmoscopy, with medical diag NA NA \$34.20 N.A. N.A. N.A. N.A N.A. N.A N.A. APG# 289 SIMPLE LASER EYE PROCEDURES \$45.60 \$0.00 \$7.60 \$11.40 65855 Trabeculoplasty by laser surgery, on \$11.40 N.A N A CPT CODE 66821 Discission of secondary membraneo \$22.80 \$38.00 19 36 \$26.60 \$26.87 \$31.35 COMPLEX LASER EYE PROCEDURES CPT CODE 67105 Repair of retinal detachment, one or \$239.40 N.A. \$51.30 \$8.06 \$91.20 NΑ \$68.40 N A \$117.80 \$26.87 ΝΔ NΔ CPT CODE 67228 Destruction of extensive or progressi ΝΔ ΝΔ \$45.60 \$16.12 \$45.60 \$0.00 \$11.40 N.A \$9.50 \$2.69 ΝΔ NΔ APG# 291 CATABACT PROCEDURES 66850 Removal of lens material: phacofrag | \$53.20 \$0.00 \$49.40 \$7.39 \$41.80 \$6.58 \$55.73 \$11.61 \$53.20 N.A 66940 Extraction of lens with or without iti \$44.65 \$20.20 \$33.78 \$17.46 \$26.60 46.58 \$28.50 \$11.40 \$26.33 CPT CODE \$39.90 66983 Intracapsular cataract extraction wit \$45.60 \$13 38 \$63.17 \$28.52 **58 88** \$8.06 \$47.50 \$8.06 CPT CODE 66984 Extracapsular cataract removal with \$42.56 \$6.80 \$60.11 \$51.98 \$20.68 \$35.72 \$8.10 \$46.55 \$15.44 \$41.67 \$38 22 66985 Insertion of intraocular lens subsequ \$47,25 \$28.04 \$8.72 \$2.19 \$31.59 \$8.39 \$39.71 \$3 94 CPT CODE 292 SIMPLE ANTERIOR SEGMENT EYE PROCEDURES FOR GLAUCOMA CPT CODE 66500 Iridotomy by stab incision (separate \$20.90 \$2.69 \$34.20 \$16.12 \$19.00 NA \$34.20 N.A. \$8.06 \$22.80 N.A. \$45.60 \$34.20 \$36.10 \$13.44 N.A. 66720 Cyclocryotherapy initial N.A. N.A. N.A. APG# 293 COMPLEX ANTERIOR SEGMENT EYE PROCEDURES FOR GLAUCOMA \$45.60 \$34.20 \$45.60 66150 Fistulization of sclera for glaucoma: \$53.20 NΔ \$45.60 NΔ ΝΔ ΝΔ CPT CODE \$48.79 \$6.72 CPT CODE 66170 Fistulization of sclera for glaucoma t ΝΔ \$51.30 \$8.06 \$36.63 \$9.72 \$44.23 \$10.98 N A. ΝΔ 294 SIMPLE ANTERIOR SEGMENT BY PROCEDURES EXCEPT FOR GLAUCOMA

\$22.80

\$53.20

N.A.

\$10.75

\$45.60

\$19.00

N.A

\$26.60

\$22.80

N.A

\$16.12

\$34.20

\$38.00

\$0.00

\$10.75

\$34.20

N.A.

N.A

N.A.

N.A

65450 Destruction of Jesion of cornea by cr \$34.20

66820 Discussion or secondary membraneo \$28.88

SURGICAL	+							ndirect Equip						
EURGICAL					Hos	pital		nanout Equi			A.:	S.C.		
ELIBRICAL			Va	lume		ume	Vol	ume	Vol	ume	Vol	ume	Vol	lume
SURGICAL				0-2999)		-5999)		00+)		-2999)	(3000	-5999)	(60)	00+)
			(1000	Standard	(3000	Standard	(00)	Standard	1.000	Standard		Standard		Standar
		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Daviation	Mean	Deviation	Mean	Deviation	Mean	Deviatio
PROCEDURES		MODERATE ANTERIOR SEGMENT EY			IVICUII	DOVIGUOIT	1110011							
APG#				N.A.	\$34.20	\$16.12	\$34.20	N.A.	\$19.95	\$9.50	\$25.84	\$12.72	\$41.80	N.A.
CPT CODE		Iridectomy, w/corneoscleral or corne		\$19.19	\$43.07	\$26.69	\$19.00	N.A.	\$45.60	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Removal of secondary membraneous COMPLEX ANTERIOR SEGMENT EYE					410.00							
APG#	296		N.A.	N.A.	\$45.60	N.A.	\$45.60	N.A.	\$65.66	\$11.45	\$65.17	\$15.58	\$77.52	\$12.06
CPT CODE		Keratoplasty, penetrating, includes a		\$17.50	\$48.45	\$1.90	\$19.00	N.A.	\$48.13	\$2.19	\$49.40	\$0.00	\$53.20	\$5.37
CPT CODE		Removal of vitreous, anterior approa			940.45	\$1.50	V13.00	14.7.	740.13	72.15	*********	10.00	100.20	10121
APG#		SIMPLE POSTERIOR SEGMENT EYE F		N.A.	\$51.30	\$8.06	\$34.20	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Destruction of localized lesion of reti	N.A.	N.A.	\$57.00	N.A.	\$45.60	N.A.	\$7.60	N.A.	\$34.20	N.A.	N.A.	N.A.
CPT CODE		Destruction of extensive or progressi	N.A.		\$57.00	IV.A.	745.00	14.0.	V7.00	14.751	101120	1101	110.11	
APG#	298	COMPLEX POSTERIOR SEGMENT EY			115.00	\$0,00	N.A.	N.A.	\$45.60	\$0.00	\$74.10	\$43,16	\$45.60	\$0.00
CPT CODE		Vitrectomy, mechanical, pars plana	\$68.40	\$45.60	\$45.60	N.A.	\$91.20	N.A.	\$68.40	N.A.	\$98.80	N.A.	\$91.20	N.A.
CPT CODE		Repair of retinal detachment, one or		N.A.	\$57.00	N.A.	\$91.20	IV.A.	300.40	14.7.	V30.00	141/31	701120	140.0
APG#		STRABISMUS & MUSCLE EYE PROC				\$16,12	\$57.00	N.A.	\$36,18	\$13.94	\$38.00	\$5,37	\$41.80	\$6.58
CPT CODE		Strabismus surgery on patient not pr		\$11.40	\$45.60		\$57.00	N.A.	\$53.88	\$23.19	\$48.31	\$6.09	\$49.40	\$6.58
CPT CODE		Strabismus surgery on patient not pr		\$0.00	\$49.40	\$17.41	\$57.00	N.A.	903.00	923.19	940.31	₹6.03	743.40	70.50
APG#	300	SIMPLE REPAIR & PLASTIC PROCED							\$25.54	\$16.03	\$25.33	\$4,39	\$28.12	\$10.64
CPT CODE		Excision of lesion of eye lid without	\$38.76	\$15.29	\$28.50	\$8.06	\$68.40	N.A.	\$25.54	\$11.71	\$38.00	\$5.89	\$48.89	\$3,07
CPT CODE	67921	Repair of entropion suture	\$41.04	\$15.29	\$39.90	\$11.40	\$34.20	N.A.	\$30.40	\$11.71	\$30.00	95.65	740.03	75.07
APG#	301	COMPLEX REPAIR & PLASTIC PROC		FEYE					\$59.79	\$23.28	\$58.39	\$12.61	\$62.70	\$8.06
CPT CODE		Repair of blepharoptosis (tarso)-levat		\$9.80	\$62.57	\$28.50	\$68.40	\$0.00				\$20.39	\$91.20	\$0.00
CPT CODE	68720	Dacryocystorhinostomy (fistulization		\$0.00	\$85.50	\$11.40	\$91.20	\$0.00	\$76.95	\$21.58	\$82.08	\$20.39	\$91.20	\$0.00
APG#	313	OTORHINOLARYNGOLOGIC FUNCTION												N.A.
CPT CODE		Oscillating tracking test, with record		N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	92585	Brainstem evoked response recordin	\$91.20	N.A.	\$53.96	N.A.	\$68.40	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	314	MAJOR EXTERNAL EAR PROCEDUR		1									400.00	N. A.
CPT CODE	69140	Excision exostosis (es), external audi	\$53.20	\$21.50	\$38.00	\$0.00	\$41.80	\$5.37	\$38.00	N.A.	\$38.00	N.A.	\$38.00	N.A.
CPT CODE	69310	Reconstruction of external auditory	\$58.27	\$39.00	\$64.60	\$37.62	\$45.60	N.A.	N.A.	N.A.	\$57.00	N.A.	\$91.20	N.A.
APG#	315	TYMPANOSTOMY & OTHER SIMPLE	MIDDLE 8	AR PROCE										
CPT CODE		Myringotomy including aspiration an	\$23.81	\$3.28	\$26.60	\$0.00	\$30.40	\$13.16	\$19.00	\$10.75	\$30.40	\$19.38	\$21.85	\$5.70
CPT CODE	69433	Tympanostomy (requiring insertion o	\$17.10	\$3.18	\$22.80	N.A.	\$22.80	\$0.00	\$17.73	\$2.19	\$15.20	\$0.00	\$15.96	\$4.16
APG#	316	TYMPANOPLASTY & OTHER COMPL	EX MIDDI	E EAR PRO								1		-
CPT CODE	69631	Tympanoplasty w/o mastoidectomy	\$71.44	\$6.80	\$85.50	\$34.20	\$91.20	\$0.00	\$60.80	\$10.75	\$68.40	\$0.00	\$79.80	\$13.10
CPT CODE	69660	Stapedectomy with re-establishment	\$91.20	\$0.00	\$121.60	\$52.65	\$91.20	\$0.00	N.A.	N.A.	\$91.20	N.A.	\$106.91	\$27.2
APG#	317	INNER EAR PROCEDURES			1					!				
CPT CODE	69806	Endolymphatic sac operation; with s	\$98.80	N.A.	\$68.40	N.A.	\$68.40	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Revision fenestration operation	N.A.	N.A.	N.A.	N.A.	\$68.40	N.A.	N.A.	N.A.	\$45.60	N.A.	N.A.	N.A.
APG#	318	SIMPLE AUDIOMETRY												
CPT CODE	92557	Basic comprehensive audiometry	\$43.32	\$19.35	\$27.36	\$3.95	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Tympanometry	9.12	N.A.	7.6	0	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	319	REMOVAL OF IMPACTED CERUMEN												
CPT CODE		Removal impacted cerumen (separat	\$20.27	\$4.39	\$15.20	N.A.	\$19.00	\$5.37	\$15.20	N.A.	\$15.20	\$0.00	\$17.10	\$2.69
0000											\$39.27	\$9.37	\$39.76	\$8,19

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	IVIEA	AN AND STANDARD DEVIATION	N FOR	VENNEA	D C031.	5 BT FAC	LIII II			DOTTO	AL I IIIO	LDOILE		
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						spital						.C.		
			Vo	ume		lume		lume		ume		ume		ume
			(1000	-2999)	(3000	-5999)	(60	00+)	(1000	-2999)	(3000	-5999)	(600	00+)
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	32000	Thoracentesis, puncture or pleural c	\$121.53	\$93.13	\$126.11	\$58.53	N.A.	N.A.	N.A.	N.A.	\$94.63	N.A.	N.A.	N.A.
CPT CODE		Biopsy, lung or mediastinum, percut		\$297.98	\$189.88	\$108.69	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	81	SIMPLE ENDOSCOPY OF THE UPPER						i						
CPT CODE		Laryngoscopy, indirect (separate pro		\$20.20	\$124.23	\$70.07	\$52.73	\$6.05	\$217.89	N.A.	\$143.32	\$86.78	\$49.21	\$35.32
CPT CODE		Laryngoscopy, indirect (separate pro		\$74.68	\$113.06	\$69.82	\$52.73	\$6.05	\$217.89	N.A.	\$99.12	\$112.43	\$49.21	\$35.32
APG#	82	COMPLEX ENDOSCOPY OF THE UPP		Y										
CPT CODE	31535	Laryngoscopy, direct, operative with		\$83.13	\$157.83	\$81.21	\$118.06	\$96.99	\$193.87	\$220.72	\$147.18	\$78.97	\$54.93	\$43.94
CPT CODE		Laryngoscopy, direct, operative, wit		\$92.46	\$179.79	\$62.72	\$62.67	\$20.11	\$212.01	\$241.76	\$203.52	\$155.04	\$46.30	\$24.16
APG#	83	SIMPLE ENDOSCOPY OF THE LOWER												
CPT CODE		Bronchoscopy diagnostic, (flexible or		\$170.33	\$158.14	\$102.94	\$91.80	\$78.98	\$214.61	\$145.48	\$155.99	\$95.34	\$29.88	N.A.
CPT CODE		Bronchoscopy with biopsy	\$125,48	\$163,13	\$174.47	\$111.51	\$95.23	\$77.76	\$382.96	N.A.	\$77.99	\$23.53	\$32.70	N.A.
APG#	84	COMPLEX ENDOSCOPY OF THE LOV				1								
CPT CODE		Bronchoscopy w/ transbronchial lun		\$189.20	\$167.00	\$94.01	\$99.81	\$89.01	\$382.96	N.A.	\$119.10	N.A.	N.A.	N.A.
CPT CODE		Bronchoscopy with transbronchial n		\$120.67	\$139.92	\$73.15	\$144.91	\$118.69	N.A.	N.A.	\$94.63	N.A.	N.A.	N.A.
APG#	85	NASAL CAUTERIZATION & PACKING		, , , , , , , ,						- 7				
CPT CODE	30901		\$58.94	\$24.35	\$168.87	\$101.57	\$38.20	\$31.98	\$35.27	N.A.	\$129.22	\$60.46	\$29.24	N.A.
CPT CODE		Control nasal hemorrhage, anterior,	\$48.21	\$29.25	\$170.40	\$99.09	\$56.12	\$10.85	N.A.	N.A.	\$152.79	\$67.81	\$29.24	N.A.
APG#	86	SIMPLE LIP, MOUTH & SALIVARY G			***************************************	100100	100112		1					
CPT CODE		Excision of lesion of tongue without	\$49.73	\$27.11	\$153.85	\$93.10	\$59.36	\$15.42	\$44.32	N.A.	\$115.75	\$26.33	\$35.20	\$8.43
		Excision of lesion of tongue with clo	\$75.35	\$59.55	\$170.65	\$136.55	\$59.36	\$15.42	N.A.	N.A.	\$100.80	\$31.81	\$33.82	\$10.38
CPT CODE	87	COMPLEX LIP, MOUTH, & SALIVAR				4100.00	400100							
APG#		Vermilionectomy (lip shave), mucosa		\$30.38	\$107.60	\$44.06	\$60.98	N.A.	N.A.	N.A.	\$149.57	\$54.62	\$32.35	\$0,49
CPT CODE		Excision of parotid tumor or parotid	\$235.02	\$199.55	\$289.27	\$227.99	N.A.	N.A.	\$600.85	N.A.	\$149.70	\$14.40	\$54.15	\$5.56
CPT CODE		MISCELLANEOUS SINUS, TRACHEA				VEE7.55	141741	140.0						
APG#	88			\$29.50	\$307.11	\$164.32	\$91.41	\$7,59	\$627.78	N.A.	\$224.88	\$171.83	\$135.76	\$107.77
CPT CODE		Sinusotomy, maxillary (antrotomy); r	\$58.88	\$29.11	\$299.58	\$176.48	\$86.04	N.A.	\$581.04	N.A.	\$220.35	\$141.91	\$124.72	\$123.77
CPT CODE		Ethmoidectomy intranasal, anterior	\$58.88	\$29.11	\$295.00	3170.46	700.04	14.75.	V301.04	14.751	VELOIDO	********	***************************************	
APG#	105	EXERCISE TOLERANCE TESTS	\$27.93	\$19.41	\$19.05	\$4.74	\$11.52	\$9.29	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Cardiovascular stress test using max	\$42.62	N.A.	\$16.39	\$1.65	\$22.93	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Cardiovascular stress test using max	\$42.62	N.A.	\$10.33	\$1.00	422.55	14.0.	IV.A.	14.6.	14.74.	14.74	14.54	140.11
APG#	106	ECHOCARDIOGRAPHY	101.00	\$0.51	\$15,55	\$2.56	\$16,53	\$11,70	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Echocardiography, real-time with im	\$31.60		\$8.57	\$5.83	\$5.35	\$4.76	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Doppler echocardiography, pulsed w		\$0.17	\$8.57	\$5.83	\$5.35	\$4.76	IV.A.	N.A.	N.A.	14.A.	14.74.	14.75
APG#	108	CARDIAC ELECTROPHYSIOLOGIC TI					100.07	\$25.54	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Cardioversion, elective, electrical co	\$29.75	N.A.	N.A.	N.A.	\$32.87					N.A.	N.A.	N.A.
CPT CODE		Induction of arrhythmia by electrical	\$85.23	N.A.	N.A.	N.A.	\$14.51	\$18.05	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	109	VASCULAR CANNULATION WITH N			1							N.A.	\$175.36	N.A.
CPT CODE		Placement of central venous cathete		\$40.66	\$68.21	\$60.57	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Cannula declotting without balloon c		N.A.	\$148.25	\$137.90	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	IN.A.
APG#	110	DIAGNOSTIC CARDIAC CATHETERIZ							I					
CPT CODE	93547	Combined left heart catheterization,	\$42.62	N.A.	N.A.	N.A.	\$21.75	\$24.54	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	93549	Combined right and left heart cathet		N.A.	N.A.	N.A.	\$36.13	\$31.70	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	111	ANGIOPLASTY & TRANSCATHETER				-							-	
CPT CODE	75963	Percutaneous transluminal angioplas	N.A.	N.A.	N.A.	N.A.	\$109.77	\$96.06	N.A.	N.A.	N.A.	N.A.	N.A.,	N.A.
CPT CODE	92982	Percutaneous transluminal coronary	\$170.47	N.A.	\$97.41	N.A.	\$38.84	\$32.02	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.

	MEA	AN AND STANDARD DEVIATION	ON FOR	OVERHEA	D COSTS	BYFAC	ILIIY IY			SUNGIC	AL PROC	LDONES		
								Overhea	d Costs					
						pital					A.S			
			Vo	lume	Vol	ume		lume		ume		ume		lume
			(1000	)-2999)	(3000	-5999)	(60	00+)	(1000	1-2999)	(3000	-5999)	(600	00+)
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	54152	Circumcision, clamp procedure exce	\$311.26	\$408.96	\$194.05	\$56.61	\$65.15	N.A.	\$167.77	\$164.27	\$93.77	\$81.29	\$20.97	N.A.
CPT CODE		Circumcision, surgical excision other		\$225.02	\$208.84	\$137.40	\$62.67	\$20.11	\$205.69	\$168.42	\$192.39	\$133.99	\$141.06	\$114.76
APG#		PROSTATE NEEDLE & PUNCH BIOPS												
CPT CODE		Biopsy, prostate needle or punch sin		\$152.71	\$133.95	\$73.65	\$56.53	\$26.26	\$283.92	N.A.	\$127.54	\$52.43	\$60.20	\$51.58
CPT CODE	56705	Biopsy, prostate incisional, any appr	\$107.83	\$131.94	\$101.00	\$26.50	\$48.45	N.A.	\$250.91	N.A.	\$95.37	\$57.78	\$20.97	N.A.
APG#	214	TRANSURETHRAL RESECTION OF P	ROSTATE		ROSTATE P	ROCEDURE								
CPT CODE		Transurethral resection of bladder ne		\$139.84	\$145.74	\$39,46	\$184.83	\$175.14	\$415.97	N.A.	\$186.86	\$76.81	\$134.89	N.A.
CPT CODE		Transurethral resection or prostate, i		\$31.53	\$306.78	\$267.27	\$300.39	\$350.40	N.A.	N.A.	\$330.96	N.A.	N.A.	N.A.
APG#	236	PROCEDURES FOR PREGNANCY & N												
		Fetal non-stress test	N.A.	N.A.	\$188.53	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Initiation and/or supervision of intern		N.A.	\$35.01	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	237	PROCEDURES FOR PREGNANCY & N			400.01	14.7.11								
APG#		Treatment of spontaneous abortion,			\$98.07	\$48.16	\$116,31	\$83.88	\$171.04	\$117.02	\$58.32	\$37.75	\$75.92	\$48.02
CPT CODE		Treatment of missed abortion, any tr			\$114.03	\$78.96	\$126.25	\$69.81	\$133.85	\$97.92	\$156.50	\$99.53	\$82.81	\$62.02
CPT CODE			9171.72	V177.00	V114.00	470.00	TIEGIEG	100.01		/				
APG#	238	THERAPEUTIC ABORTION	A4.00.00	\$140.40	\$130.38	\$93.18	\$175.62	N.A.	\$86.82	\$99,11	\$185.97	\$149.71	\$84.36	N.A.
CPT CODE		Legal (therapeutic ) abortion, by dilat			\$139.93		\$175.62	N.A.	\$148.11	\$169.81	\$123.57	\$75.53	\$54.30	\$42.51
CPT CODE		Legal (therapeutic) abortion, by dilati	9245.57	\$245.70	¥133.33	\$105.50	V170.02	14.70.	¥140.11	+100101	1120101		101100	
APG#	240	FEMALE GENITAL ENDOSCOPY	4040 50	\$249.56	\$249.29	\$176.72	\$201.73	\$162.16	\$239.88	\$190.65	\$308.85	\$167.08	\$142.78	\$116.96
CPT CODE		Laparoscopy for visualization of pelv		\$260.69	\$214.24	\$175.56	\$201.73	\$162.16	\$195.36	\$124.78	\$265.40	\$139.47	\$147.06	\$101.88
CPT CODE		Laparoscopy for visualization of pelv	\$223.59	\$250.59	\$214.24	\$175.56	\$201.73	\$102.10	7133.30	V124.70	V200.40	V100.47	7147100	+101100
APG#	241	COLPOSCOPY		1000 00	4400.40	\$51.36	\$70.26	N.A.	\$336.49	\$19.04	\$197.56	\$163.94	\$59,43	\$51.73
CPT CODE		Colposcopy (vaginoscopy); (separate		\$263.86	\$130.40		\$83.41	\$18.60	\$382.96	N.A.	\$153.89	\$83.81	\$30.97	\$2.45
CPT CODE		Colposcopy (vaginoscopy); with biop		\$207.83	\$145.85	\$71.83	903.41	\$10.00	\$30Z.30	14.00	¥155.05	V00.01	V30.57	72.70
APG#	242	MISC. FEMALE REPRODUCTIVE PRO		4			100.50	100.01	\$288.59	\$40.09	\$194.74	\$189.75	\$101.79	\$99.34
CPT CODE		Biopsy of vulva (separate procedure)			\$163.24	\$102.39	\$58.50	\$26.01	\$160.11	\$120.60	\$194.74	\$158.04	\$101.79	\$86.77
CPT CODE		Biopsy of cervix, circumferential (co	\$106.02	\$150.08	\$144.93	\$72.49	\$125.14	\$89.86	\$160.11	\$120.60	\$211.29	9156.04	\$105.00	900.77
APG#	243	DILATION & CURETTAGE			-			105.11			\$53.84	N.A.	\$68.32	\$59,17
CPT CODE		Dilation and curettage of cervical stu		\$141.49	\$185.17	\$108.29	\$105.27	\$85.41	N.A.	N.A.			\$100.79	\$81.01
CPT CODE	58120	Dilation and curettage, diagnostic an		\$156.09	\$166.21	\$104.05	\$68.69	\$30.19	\$182.50	\$125.70	\$179.02	\$113.59	\$100.79	\$81,01
APG#	244	FEMALE GENITAL EXCISION & REPA						1			1			1.0.00
CPT CODE		Vulvectomy; partial, unilateral or bila		\$221.99	\$129.22	\$57.88	\$94.00	\$24.19	\$34.55	N.A.	\$219.16	\$118.10	\$134.16	\$104.09
CPT CODE	57135	Excision of vaginal cyst or tumor	\$123.57	\$164.69	\$152.09	\$103.90	\$65.62	\$6.56	\$288.59	\$40.09	\$143.61	\$98.00	\$55.70	\$45.32
APG#	261	ELECTROENCEPHALOGRAM				1								
CPT CODE		Electroencephalogram (EEG) includin		N.A.	\$28.39	\$2.91	\$31.43	\$17.24	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	95828	Polysomnography (recording, analysi	\$277.66	N.A.	N.A.	N.A.	\$42.31	\$59.82	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	262	ELECTROCONVULSIVE THERAPY						l						
CPT CODE	90870	Electroconvulsive therapy (includes	N.A.	N.A.	N.A.	N.A.	\$15.87	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	90871	Electroconvulsive therapy (includes	N.A.	N.A.	N.A.	N.A.	\$15.87	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	263	NERVE & MUSCLE TESTS												
CPT CODE	95900	Nerve conduction, velocity and/or la	N.A.	N.A.	\$15.23	N.A.	\$3.28	\$3.47	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	95904	Nerve conduction, velocity and/or la	\$20.83	N.A.	\$15.23	N.A.	\$3.28	\$3.47	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	264	INJECTION OF SUBSTANCE INTO S		RD										
CPT CODE	62278	Injection of anesthetic substance (in		\$26.31	\$69.83	\$23.60	\$96.38	\$74.43	\$177.77	\$10.06	\$91.71	\$40.11	\$120.46	\$81.34
CPT CODE		Injection of substance other than an	N.A.	N.A.	\$105.90	\$12.87	\$57.00	N.A.	\$59.88	\$58.87	\$153.16	\$96.49	\$198.68	N.A.
APG#	265	SUBDURAL & SUBARACHNOID TAP		1										

	14157	AN AND STANDARD DEVIATION			_ 00010				ad Costs					
					11-	pital		Overne	au Costs		Α.	s.C.		
									1/-		Volume		1/-	lume
				lume		ume		lume		lume	(3000-5999)			00+)
			(1000	0-2999)	(3000	-5999)	(60)	00+)	(1000	-2999)	(3000		(60	
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviatio
CPT CODE		Replacement or irrigation, ventricular	N.A.	N.A.	N.A.	N.A.	\$48.45	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	63744		N.A.	N.A.	\$404.81	N.A.	\$86.04	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	266	NERVE INJECTION & STIMULATION												
CPT CODE		Injection, anesthetic agent; stellate	\$40.65	N.A.	\$109.56	\$58.01	N.A.	N.A.	\$122.61	\$90.47	\$93.90	\$36.49	\$137.32	\$57.49
CPT CODE	64520	Injection, anesthetic agent; lumbar o		\$17.50	\$107.22	\$26.76	\$117.53	\$44.53	\$314.45	N.A.	\$149.23	\$111.82	\$137.32	\$57.49
APG#	267	REVISION & REMOVAL OF NEUROLO												
CPT CODE	63660	Revision or removal of spinal neurost		N.A.	\$111.12	N.A.	\$101.35	\$21.65	N.A.	N.A.	\$70.16	N.A.	N.A.	N.A.
CPT CODE	63688	Revision or removal of spinal neurost		N.A.	\$111.12	N.A.	\$98.03	\$16.96	N.A.	N.A.	\$119.10	N.A.	N.A.	N.A.
APG#	268	NEUROSTIMULATOR AND VENTRICE	JLAR SHU	NT IMPLAN	TATION									
CPT CODE	63650	Percutaneous implantation of neuros	\$101.01	N.A.	N.A.	N.A.	\$86.04	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	64560	Percutaneous implantation of neuros	N.A.	N.A.	N.A.	N.A.	\$86.04	N.A.	N.A.	N.A.	N.A.	N.A.	\$43.04	N.A.
APG#	269	CARPAL TUNNEL RELEASE												
CPT CODE	64721	Neuroplasty and/or transposition; me	\$222.01	\$346.17	\$205.03	\$113.92	\$90.87	\$29.42	\$241.55	\$184.63	\$231.13	\$114.43	\$164.25	\$157.77
APG#	270	NERVE REPAIR & DESTRUCTION				i								
CPT CODE	64718	Neuroplasty and/or transposition uln	\$318.46	\$532.12	\$221.70	\$81.09	\$105.03	\$44.57	\$291.54	\$271.67	\$407.70	\$201.38	\$203.65	\$227.13
CPT CODE		Neuroplasty and/or transposition; uln		\$209.70	\$183.18	\$78.67	\$105.03	\$44.57	\$455.85	\$243.15	\$298.50	\$90.87	\$206.05	\$151.87
APG#	271	COMPLEX NERVE REPAIR				1								
CPT CODE	64831	Suture of digital nerve, hand or foot;	\$180.60	\$143.39	\$201,31	\$74.89	\$85.14	\$16.45	\$382.96	N.A.	\$318.51	\$361.05	\$135.93	\$135.26
CPT CODE		Suture of one nerve, hand or foot; c	\$98.66	\$28,91	\$203.44	\$71.72	\$85.14	\$16.45	\$482.00	N.A.	\$136,51	\$51.15	\$135.93	\$135.26
APG#	272	SPINAL TAP			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
CPT CODE		Spinal puncture, lumbar, diagnostic	\$36.66	\$5.65	\$70.46	\$28.33	\$27.57	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Spinal puncture, therapeutic, for drai	N.A.	N.A.	\$48.06	\$3.07	\$44.27	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	287	MINOR OPTHALMOLOGICAL TESTS				10101								
CPT CODE		Ophthalmoscopy, with medical diag	N.A.	N.A.	N.A.	N.A.	\$11.97	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	289	SIMPLE LASER EYE PROCEDURES	14.74.	141/01	11.0.	11.7.	V11.07	14.74.	131731	11171	1317-31	141741	11173	140
CPT CODE		Trabeculoplasty by laser surgery, on	\$21.26	N.A.	\$198.67	\$77.79	\$89.07	\$40.20	\$59.64	N.A.	\$37.53	N.A.	\$15.45	N.A.
CPT CODE		Discission of secondary membraneo	\$94.97	\$88.12	\$215.62		\$63.15	\$41.44	\$110.40	\$44.39	\$61.02	\$33.21	\$105.29	\$146.06
APG#	290	COMPLEX LASER EYE PROCEDURES	734.37	V00.12	7213.02	V137.10	V03.13	V41.44	V110.40	444.00	401.02	700.E1	4 TOULES	7170100
CPT CODE		Repair of retinal detachment, one or	\$427.07	N.A.	\$177.43	\$61.50	\$111.10	N.A.	#######	N.A.	\$453.33	\$195.78	N.A.	N.A.
		Destruction of extensive or progressi	N.A.	N.A.	\$154.74	\$29.39	\$87.34	\$37.28	\$59.64	N.A.	\$76.70	\$55.39	N.A.	N.A.
CPT CODE		CATARACT PROCEDURES	N.A.	IN.A.	9134.74	929.39	907.34	937.20	933.04	N.A.	\$70.70	955.55	IV.A.	IV.A.
APG#	291		\$232.77	\$290.48	\$218.11	\$123.40	\$67.32	\$37.80	\$344.67	\$191.09	\$179.37	\$149.12	\$46.80	N.A.
CPT CODE		Removal of lens material; phacofrag				\$86.16	\$46.29	\$20.16	\$297.11	\$157.94	\$248.81	\$135.66	\$165.71	\$162.90
CPT CODE		Extraction of lens with or without iri	\$98.62	\$74.48	\$162.62	\$184.96	\$82.78	\$65.32		\$157.94	\$65.43	\$41.30	\$190.54	\$216.40
CPT CODE		Intracapsular cataract extraction wit	\$200.62									\$220.64	\$163.36	\$155.46
CPT CODE		Extracapsular cataract removal with			\$276.70	\$176.20	\$155.41	\$140.46	\$285.86		\$325,44			
CPT CODE		Insertion of intraocular lens subsequ	\$200.85	\$252.53	\$158.62	\$93.39	\$40.72	\$21.53	\$277.89	\$139.73	\$233.45	\$158.16	\$119.44	\$106.24
APG#		SIMPLE ANTERIOR SEGMENT EYE PI												1
CPT CODE		Iridotomy by stab incision (separate			\$120.62	\$13.44	\$31.74	N.A.	\$123.53	N.A.	\$119.65	\$46.92	\$23.73	N.A.
CPT CODE		Cyclocryotherapy initial	N.A.	N.A.	\$111.12	N.A.	\$48.45	N.A.	\$341.46	\$155.09	\$81.41	\$4.38	N.A.	N.A.
APG#	293	COMPLEX ANTERIOR SEGMENT EYE												
CPT CODE		Fistulization of sclera for glaucoma;	\$25.11	N.A.	\$111.12	N.A.	\$60.98	N.A.	\$501.25	\$27.22	\$84.50	N.A.	N.A.	N.A.
CPT CODE		Fistulization of sclera for glaucoma t	N.A.	N.A.	\$263.82	\$102.14	\$58.10	\$21.80	\$377.06	\$162.84	\$392.33	\$256.77	N.A.	N.A.
APG#	294	SIMPLE ANTERIOR SEGMENT EYE PI												
CPT CODE		Destruction of lesion of cornea by cr		N.A.	\$65.45	N.A.	\$60.98	N.A.	\$248.77	N.A.	\$163.95	\$98.03	\$32.00	N.A.
CPT CODE	66820	Discussion or secondary membraneo	\$144.51	\$173.23	\$196.28	\$120.43	\$31.74	N.A.	\$224.71	\$107.33	\$85.48	\$1.39	N.A.	N.A.

	MEAN	AND STANDARD DEVIATION	ON FOR TOTAL INDIRECT COSTS BY FACILITY TYPE AND VOLUME - SURGICAL PROCEDURES  Total Indirect Costs											
	-							Total Indi	rect Costs					
						pital						S.C.		
	1			ume		ume		ume		ume		ume		lume
			(1000	2999)	(3000	-5999)	(60)	00+)	(1000	-2999)	(3000	-5999)	(60	100+)
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standa
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	31020	Sinusotomy, maxillary (antrotomy); i		\$58.93	\$402.14	\$261.67	\$116.23	\$13.65	\$250.45	\$135.00	\$379.54	\$264.75	\$313.45	\$243.5
APG#	65	COMPLEX MAXILLOFACIAL PROCED	URES										<u> </u>	
CPT CODE	30520	Septoplasty or submucous resection	\$180.69	\$49.13	\$381.06	\$161.41	\$304.03	\$217.71	\$379.53	\$225.02	\$470.79	\$197.64	\$540.78	\$467.1
CPT CODE	30620	Reconstruction, functional, internal	\$277.13	\$209.23	\$449.04	\$251.89	\$345.82	\$243.84	\$535.91	\$374.87	\$526.15	\$330.80	\$299.26	\$203.4
APG#	66	INCISION OF BONE, JOINT, & TEND	ON											
CPT CODE	25000	Tendon sheath incision at radial styl	\$254.91	\$258.22	\$231.43	\$89.52	\$213.48	\$118.30	\$447.44	\$206.88	\$239.78	\$142.67	\$207.42	\$114.9
CPT CODE	28270	Capsulotomy for contracture; metat	\$327.03	\$339.39	\$325.60	\$170.95	\$106.58	N.A.	\$562.25	\$273.62	\$228.75	\$116.64	\$100.10	\$29.73
APG#	67	BUNION PROCEDURES						1						
CPT CODE	28290	Hallux valgus (bunion) correction, wi	\$290.87	\$220.11	\$261.48	\$90.32	\$192.82	\$54.28	\$597.83	\$410.87	\$506.00	\$395.74	\$313.17	\$171.1
CPT CODE	28292	Hallux valgus (bunion) correction, wi		\$355.06	\$330.49	\$172.25	\$192.82	\$54.28	\$452.69	\$320.06	\$392.36	\$197.17	\$415.38	\$379.4
APG#	68	EXCISION OF SONE, JOINT & TEND												
CPT CODE	26160	Excision or lesion of tendon sheath of	\$254.75	\$218.58	\$239.38	\$121.96	\$201.78	\$127.47	\$364.05	\$216.92	\$296.76	\$209.37	\$204.60	
CPT CODE	28080	Excision of interdigital (Morton) neur				\$101.56	\$133.78	\$38.47	\$413.94	\$284.39	\$309.90	\$128.89	\$255.10	\$159.5
APG#	69	EXCISION OF 80NE , JOINT & TEND	ON EXCEP	T HAND &	FOOT				l				1	
CPT CODE	24105	Excision, olecranon bursa	\$214.13	\$175.91	\$263.30	\$125.14	\$133.78	\$38.47	\$595.76	N.A.,	\$263.90	\$162.55	\$273.96	
CPT CODE	27345	Excision of synovial cyst of popiteal	\$152.04	\$75.26	\$238.15	\$132.18	\$106.58	N.A.	\$519.68	\$128.74	\$288.33	\$181.35	\$185.05	\$119.0
APG#	70	ARTHROPLASTY								1	l			1
CPT CODE	25447	Interposition arthroplasty, intercarpal	\$384.57	\$291.08	\$281.12	\$128.61	\$286.13	\$220.08	\$345.91	N.A.	\$256.49	\$133.10	\$121.13	N.A.
CPT CODE	26535	Arthroplasty interphalangeal joint; si	\$280.91	\$197.84	\$258.69	\$113.23	\$244.42	\$171.57	N.A.	N.A.	\$181.68	\$126.05	\$222.26	\$138.6
APG#	71	HAND & FOOT TENOTOMY												
CPT CODE	26455	Tenotomy, flexor, single, finger ope	\$259.14	\$230.04	\$206.34	\$98.09	\$201.78	\$127.47	\$561.46	\$129.32	\$226.62	\$122.21	\$174.16	\$91.7
CPT CODE	28234	Tenotomy, open, extensor, foot or t	\$160.43	\$90.18	\$253.99	\$144.14	\$106.58	N.A.	\$511.38	N.A.	\$398.47	\$342.91	\$86.64	\$10.70
APG#	72	SIMPLE HAND & FOOT REPAIR EXC	EPT TENOT	OMY			·							
CPT CODE	26055	Tendon sheath incision for trigger fin	\$236.52	\$225.20	\$225.29	\$113.15	\$160.04	\$109.41	\$447.48	\$211.85	\$213.78	\$98.18	\$190.65	\$96.86
CPT CODE	28285	Hammertoe operation, one tow (e.g.	\$339.00	\$218.19	\$283.77	\$118.37	\$143.10	\$39.62	\$460.64	\$333.81	\$323.59	\$118.95	\$320.64	\$301.4
APG#	73	COMPLEX HAND & FOOT REPAIR												
CPT CODE	26860	Arthrodesis, interphalangeal joint; wi	\$307.83	\$170.48	\$372.52	\$155.04	\$175.01	\$62.93	\$710.48	\$564.99	\$421.69	\$267.55	\$235.53	\$135.9
CPT CODE		Amputation, metatarsal, with toe, si	\$180.27	\$149.91	\$235.53	\$110.69	\$116.23	\$13.65	\$387.27	N.A.	\$226.19	\$148.01	\$357.02	\$481.8
APG#	74	REPAIR, EXCEPT ARTHROTOMY, OF	BONE, JO	INT, TENDO	N EXCEPT	OF HAND	& FOOT							
CPT CODE	23420	Repair of complete shoulder (rotator)	\$271.69	\$162.15	\$401.97	\$96.54	\$298.02	N.A.	\$367.76	N.A.	\$669.06	\$460.94	\$555.99	N.A.
CPT CODE	25260	Repair, tendon or muscle, flexor, for	\$413.16	\$476.94	\$288.51	\$128.23	\$153.94	\$33.14	\$553.57	\$59.67	\$468.17	\$521.91	\$172.07	\$119.2
APG#	75	ARTHROTOMY EXCEPT OF HAND &	FOOT											
CPT CODE	27332	Arthrotomy, knee, for excision of se	\$217.47	\$108.53	\$283.78	\$118.75	\$157.71	\$4.63	N.A.	N.A.	\$179.61	\$74.04	\$188.46	
CPT CODE		Arthrotomy, knee, for excision of se		\$91.89	\$288.46	\$91.79	\$154.44	N.A.	N.A.	N.A.	\$208.75	\$115.24	\$188.46	\$57.0
APG#	76	ARTHROCENTESIS & LIGAMENT OR		NJECTION							1			
CPT CODE	20550	Injection, tendon sheath, ligament, t	\$280.75	\$243.29	\$105.29	\$64.52	\$82.65	N.A.	\$324.66	\$18.83	\$208.20	\$141.43	\$157.79	\$139.7
CPT CODE		Arthrocentesis, aspiration and/or inje		\$367.82	\$170.16	\$108.94	\$110.12	\$38.85	\$362.45	N.A.	\$199.63	\$176.76	\$63.22	\$5.75
CPT CODE		Arthrocentesis, aspiration and/or inje		\$78.45	\$156.27	\$72.26	\$82.65	N.A.	N.A.	N.A.	\$150.02	\$108.29	\$63.22	\$5.75
APG#	77	SPEECH THERAPY												
CPT CODE		Speech, language or hearing therapy	\$74.70	\$59.01	\$33.71	\$11.90	\$37.78	\$4.22	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Speech, language or hearing therapy	N.A.	N.A.	\$39.16	\$10.24	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	79	PULMONARY TEST & THERAPY EXC		METRY										
CPT CODE		Intermittent positive pressure breathi		N.A.	\$20.94	\$5.09	\$24.02	\$9.22	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Noninvasive ear or pulse oximetry fo		\$1.34	\$7.98	\$5.13	\$15.38	\$5.64	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	80	NEEDLE & CATHETER BIOPSY, ASPI	RATION. L	AVAGE & II	TUBATION	1								

	MEAN	AND STANDARD DEVIATION	FOR TO	TAL INDIF	ECT COS	IS BY FA	ACILITY	TYPE ANI	VOLUM	IE - 30NC	NOAL III	OCLDOM		
								Total Indi	ect Costs					
					Hos							S.C		
			Vol	ume	Volu			ume		ume		ume		lume
			(1000	-2999)	(3000		(600	00+)	(1000	-2999)	(3000	-5999)	(600	00+)
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
CPT CODE	32000	Thoracentesis, puncture or pleural c	\$195.01	\$93.20	\$190.32	\$74.81	N.A.	N.A.	N.A.	N.A.	\$159.12	N.A.	N.A.	N.A.
CPT CODE	32405	Siopsy, lung or mediastinum, percut	\$353.89	\$270.74	\$297.48	\$157.68	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	81	SIMPLE ENDOSCOPY OF THE UPPER	AIRWAY											
CPT CODE		Laryngoscopy, indirect (separate pro		\$36.11	\$164.20	\$70.38	\$86.71	\$5.74	\$263.16	N.A.	\$241.25	\$175.56	\$112.03	\$63.29
CPT CODE	31510	Laryngoscopy, indirect (separate pro	\$120.52	\$70.21	\$152.04	\$69.67	\$86.71	\$5.74	\$263.16	N.A.	\$190.10	\$210.11	\$112.03	\$63.29
APG#	82	COMPLEX ENDOSCOPY OF THE UPP		Y										
CPT CODE		Laryngoscopy, direct, operative with		\$85.41	\$218.32	\$76.37	\$154.89	\$90.32	\$291.73	\$193.64	\$235.26	\$98.63	\$128.05	\$86.41
CPT CODE	31541	Laryngoscopy, direct, operative, wit	\$164.73	\$97.50	\$258.81	\$56.56	\$104.26	\$30.57	\$319.51	\$212.85	\$329.23	\$187.62	\$110.03	\$41.20
APG#	83	SIMPLE ENDOSCOPY OF THE LOWER	RAIRWAY											
CPT CODE		Bronchoscopy diagnostic, (flexible or		\$164.83	\$209.22	\$99.05	\$128.47	\$74.65	\$346.29	\$190.26	\$263.15	\$157.92	\$85.23	N.A.
CPT CODE		Bronchoscopy with biopsy	\$197.75	\$160.79	\$228.90	\$107.06	\$134.76	\$72.51	\$470.02	N.A.	\$140.09	\$26.91	\$94.21	N.A.
	84	COMPLEX ENDOSCOPY OF THE LOV										1		
APG#		Bronchoscopy w/ transbronchial lun		\$179.14	\$227.91	\$86.79	\$136.98	\$83.53	\$470.02	N.A.	\$202.82	N.A.	N.A.	N.A.
CPT CODE		Bronchoscopy with transbronchial n	\$216.84	\$118.88	\$202.81	\$82.89	\$181.36	\$105.76	N.A.	N.A.	\$159.12	N.A.	N.A.	N.A.
CPT CODE	85	NASAL CAUTERIZATION & PACKING		¥110.00	7202101									
APG#		Control nasal hemorrhage, anterior,	\$135.66	\$68.31	\$221.84	\$110.84	\$76.26	\$39.26	\$81.47	N.A.	\$234.58	\$127.33	\$71.41	N.A.
CPT CODE		Control nasal hemorrhage, anterior,	\$119.16	\$64.82	\$224.80	\$105,44	\$97.29	\$20.70	N.A.	N.A.	\$259.39	\$89.57	\$71.41	N.A.
CPT CODE	86	SIMPLE LIP, MOUTH & SALIVARY G			122.1100									
APG#		Excision of lesion of tongue without		\$58.62	\$206.82	\$91.10	\$98,42	\$22.30	\$183.20	N.A.	\$203.28	\$50.93	\$96.27	\$35.16
CPT CODE		Excision of lesion of tongue without		\$57.62	\$227.56	\$137.35	\$98.42	\$22.30	N.A.	N.A.	\$179.96	\$70.69	\$92.43	\$40.58
CPT CODE		COMPLEX LIP, MOUTH, & SALIVARY	4 CI AND 6			V107100	V0017E	100.00		1				
APG#	87	Vermilionectomy (lip shave), mucosa		\$65.92	\$174.25	\$51.68	\$106.58	N.A.	N.A.	N.A.	\$272.21	\$118.74	\$86.64	\$10.70
CPT CODE					\$441.87	\$249.74	N.A.	N.A.	\$743.06	N.A.	\$268.59	\$10.02	\$152.34	\$32.00
CPT CODE		Excision of parotid tumor or parotid MISCELLANEOUS SINUS, TRACHEA	9402.07			4240174	- 110 11				1		1	
APG#	88			\$35.49	\$432.44	\$163.44	\$157.71	\$4.63	****	N.A.	\$396,14	\$237.99	\$333.90	\$216.03
CPT CODE		Sinusotomy, maxillary (antrotomy); r	\$152.70	\$36.78	\$400.01	\$169.50	\$154.44	N.A.	\$718.23	N.A.	\$391.65	\$211.42	\$297.08	\$255.90
CPT CODE		Ethmoidectomy intranasal, anterior	\$152.70	930.76	3400.01	V103.30	V104.44	14121	V/10180	1100	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
APG#		EXERCISE TOLERANCE TESTS	\$61.34	\$45.16	\$60,41	\$17.12	\$62,27	\$14.75	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Cardiovascular stress test using max		N.A.	\$53.00	\$16.02	\$53.33	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Cardiovascular stress test using max	\$88.22	IN.A.	903.00	\$10.02	455.55	14161	141741	140.0			1	
APG#	106	ECHOCARDIOGRAPHY	100.00	\$2.68	\$48.78	\$7,39	\$64.09	\$22.13	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Echocardiography, real-time with im	\$68.06	\$2.68	\$25.52	\$14.05	\$19.62	\$7.50	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE ·		Doppler echocardiography, pulsed w		\$0.89	\$25.52	\$14.00	913.02	47.50	14.74	141741	110.0	741111		1
APG#	108	CARDIAC ELECTROPHYSIOLOGIC TI		N.A.	N.A.	N.A.	\$116.19	\$70.88	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Cardioversion, elective, electrical co		N.A.	N.A.	N.A.	\$98.12	\$28.78	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Induction of arrhythmia by electrical	\$176.43		N.A.	N.A.	990.12	\$20.70	14.74	14.7	14.6.	14.7%	1 110	
APG#	109	VASCULAR CANNULATION WITH N			\$133.99	\$84.78	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	\$384.08	N.A.
CPT CODE		Placement of central venous cathete		\$97.37		\$141.17	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Cannula declotting without balloon of		N.A.	\$224.66	\$141.17	IN.A.	IN.A.	IV.M.	14.74.	14.74.	14074		
APG#	110	DIAGNOSTIC CARDIAC CATHETERI			N.A.	N.A.	\$75.00	\$39.40	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Combined left heart catheterization,	\$88.22	N.A.			\$135.11	\$81.57	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Combined right and left heart cathet		N.A.	N.A.	N.A.	9135.11	\$81.07	IN.A.	IV.A.	14.A.	IN.A.	IN.A.	111.7
APG#	111	ANGIOPLASTY & TRANSCATHETER			11.4	A. A.	\$222.81	\$138.85	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	75963	Percutaneous transluminal angioplas	N.A.	N.A.	N.A.	N.A.		\$138.85	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Percutaneous transluminal coronary	\$352.87	N.A.	\$300.92	N.A.	\$189.82	₹67.00	N.A.	IN.A.	N.A.	N.A.	14.A.	14.0.
APG#	112	PACEMAKER INSERTION & REPLACE	EMENT											

		AND STANDARD DEVIATION		742 114211					rect Costs					
					II	pital		Total Indi	ect costs		Α.	s.c.		
							1/-1	ume	Mal	ume		ume	Vol	lume
				ume		ume		00+1		-2999)		-5999)		00+1
			(1000	-2999)	(3000	-5999)	(60)		(1000	Standard	(3000	Standard	(60)	Standa
SURGICAL				Standard		Standard		Standard			11	Deviation	Mean	Deviation
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean N.A.	N.A.	N.A.	N.A.
CPT CODE		Insertion or replacement of pacemak		\$210.79	\$294.43	\$128.95	\$441.75	N.A.	N.A.	N.A.		N.A.	N.A.	N.A.
CPT CODE	33219	Repair of pacemaker with replaceme		\$224.29	\$230.99	\$104.33	\$441.75	N.A.	N.A.	N.A.	N.A.	N.A.	IN.A.	IV.A.
APG#	113	REMOVAL & REVISION OF PACEMA												
CPT CODE		Insertion, replacement, or repositioni		\$261.35	\$277.44	\$173.08	\$441.75	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	36497	Removal of implantable intravenous i		\$328.82	\$179.65	\$109.39	\$160.99	N.A.	\$263.16	N.A.	\$309.44	\$113.34	\$447.21	\$542.3
APG#	114	MINOR VASCULAR REPAIR & FISTU	A CONST	RUCTION										
CPT CODE	35875	Thrombectomy and/or repair of arter	\$283.42	\$79.52	\$281.38	\$220.56	\$173.20	N.A.	N.A.	N.A.	\$155.44	N.A.	N.A.	N.A.
CPT CODE	36495	Insertion of implantable intravenous i	\$251.28	\$182.04	\$238.21	\$133.70	\$160.99	N.A.	N.A.	N.A.	\$304.58	\$76.01	\$79.08	N.A.
APG#		SECONDARY VARICOSE VEINS & VA		NJECTION										
CPT CODE		Ligation, division, and/or excision of		\$350.30	\$459.35	\$184.09	\$192.82	\$54.28	\$891.99	N.A.	\$492.20	\$251.25	\$285.60	\$118.5
CPT CODE	37799	Unlisted procedure, vascular surgery	N.A.	N.A.	\$172.43	N.A.	N.A.	N.A.	N.A.	N.A.	\$349.86	N.A.	N.A.	N.A.
APG#	116	VASCULAR LIGATION					1							
CPT CODE		Ligation, major artery (e.g., post-tra	\$224.82	\$94.47	\$287.59	\$90.40	\$202.30	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Interrupting, partial or complete, or f		\$94.48	\$403.87	\$353.53	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Ligation and division and complete s		\$104.23	\$429.35	\$249.22	\$154.44	N.A.	\$492.85	\$295.90	\$340.67	\$138.63	\$267.20	\$148.8
APG#		CARDIOPULMONARY RESUSCITATION												
CPT CODE		Intubation, endotracheal, emergency	\$81.22	\$37.31	\$121.98	\$89.98	\$65.93	\$90.48	N.A.	N.A.	\$71.70	N.A.	\$33.07	N.A.
CPT CODE		Cardiopulmonary resuscitation (e.g.,	\$72.41	N.A.	N.A.	N.A.	\$149.57	\$89.79	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	131	CHEMOTHERAPY BY INFUSION	V/2.41	14.74	14074	741741	*********					1		
		Chemotherapy injection, intravenous	N.A.	N.A.	N.A.	N.A.	\$177.43	\$171.74	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy injection, intravenous	N.A.	N.A.	N.A.	N.A.		\$175.31	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE			N.A.	N.A.	N.A.	N.A.	\$379.64	\$93.31	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy inject, iv, complex, u CHEMOTHERAPY EXCEPT 8Y INFUS		IV.A.	IV.A.	N.A.	7373.04	V33.51	11.0.	14.00	141/71	14174	13.73	140741
APG#	132		N.A.	N.A.	N.A.	N.A.	\$85.34	\$55.75	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Chemotherapy injection, intravenous	N.A.	IV.A.	IV.A.	IV.A.	700.34	955.75	14.0.	14.70.	14.0.	111.01	14.61	14.741
CPT CODE		Unlisted chemotherapy procedure					-				+		_	
APG#	133	TRANSFUSION & PHLE8OTOMY		10010	4400.50	000000	\$95.24	\$16.04	N.A.	N.A.	N.A.	N.A.	\$194.13	N.A.
CPT CODE		Transfusion, blood or blood compon		\$60.10	\$122.50	\$112.48			N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Push transfusion, blood, 2 years or u		N.A.	N.A.	N.A.	\$106.58	N.A.	N.A.	N.A.	IV.A.	IV.A.	N.A.	IV.A.
APG#		8LOOD & 8LOOD PRODUCT EXCHA		ļ										
CPT CODE		Exchange transfusion, blood, other t	N.A.	N.A.	N.A.	N.A.	\$106.58	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	36520	Therapeutic apheresis (plasma and/o	N.A.	N.A.	######	\$860.45	\$74.67	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	135	DEEP LYMPH STRUCTURE & THYRO												
CPT CODE '		8iopsy or excision of lymph node(s);			\$293.17	\$128.84	\$133.78	\$38.47	\$148.33	\$56.75	\$354.27	\$236.52	\$172.07	\$119.2
CPT CODE	38525	Biopsy or excision of lymph node(s);	\$258.01	\$229.90	\$346.58	\$163.23	\$98.67	\$11.18	\$202.00	\$82.23	\$290.51	\$106.89	\$244.53	\$230.4
APG#	136	ALLERGY TESTS AND IMMUNOTHE												
CPT CODE	95001	Percutaneous tests (scratch, punctur	e, prick) w	ith allergeni	c extracts,	immediate t	ype reaction	n, specify n	umber of te	ests				
APG#	. 157	ALIMENTARY TESTS AND SIMPLE T	UBE PLAC							-		1		-
CPT CODE	91010	Esophageal motility study	N.A.	N.A.	\$62.62	N.A.	\$92.33	\$66.08	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	91030	Esophagus, acid perfusion (Bernstein	N.A.	N.A.	\$62.78	\$0.23	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	158	ESOPHAGEAL DILATION WITHOUT	NDOSCO	PΥ										
CPT CODE	43450	Dilation of esophagus, by unguided	\$86.04	\$67.93	\$144.74	\$76.29	\$64.47	\$28.13	N.A.	N.A.	\$231.97	N.A.	\$153.21	\$128.0
CPT CODE		Dilation of esophagus, by unguided	\$57.39	\$25.67	\$124.22	\$80.29	\$42.28	\$15.84	\$180.42	N.A.	\$100.84	N.A.	\$149.38	\$132.7
APG#		PERCUTANEOUS & OTHER SIMPLE		TESTINAL E	BIOPSY									
CPT CODE		Biopsy of liver, percutaneous needle		\$292.02	\$163.70	\$57.92	N.A.	N.A.	\$104.82	N.A.	N.A.	N.A.	\$102.10	N.A.
CPT CODE		Biopsy, abdominal or retroperitoneal			\$117.70	N.A.	\$175.71	\$165.46	N.A.	N.A.	N.A.	N.A.	\$102.10	N.A.

	WICHIN	AND STANDARD DEVIATION	10						ect Costs					
					Hos	pital		. 0(0:0			A.5	S.C.		
			Vol	lume		ume	Vol	ume	Vol	ume	Volume		Vol	lume
	-			-2999)		-5999)		20+)		-2999)		-5999)	(600	00+1
			(1000	Standard	10000	Standard	1001	Standard	1.000	Standard	11111	Standard		Standar
SURGICAL		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation
PROCEDURES	04000	Esophageal intubation and collection		N.A.	\$110.18	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	160	ANOSCOPY WITH BIOPSY & DIAGN	OCTIC DDO			14.74.	141711	14041						
APG#		Proctosigmoidoscopy diagnostic (sep		\$49.04	\$88.38	\$63.58	\$58.72	N.A.	\$263.16	N.A.	\$83.77	\$44.76	\$40.69	N.A.
CPT CODE		Sigmoidoscopy, flexible fiberoptic di		\$86.14	\$121.33	\$65.70	\$218,48	\$53.27	\$219.26	\$179.11	\$204.67	\$143.66	\$121.32	\$115.7
CPT CODE			\$87.68	\$42.85	\$128.14	\$101.54	\$58.72	N.A.	N.A.	N.A.	\$156.92	\$98.67	\$53.36	\$7.01
CPT CODE		Anoscopy for removal of polyp			\$120.14	V101.54	V30.72	14.6.	14.741	140741	********	100101		
APG#	161	PROCTOSIGMOIDOSCOPY WITH EX		\$91.18	\$130.36	\$72.55	\$128.78	\$111.92	\$150.20	\$112.95	\$133.69	\$95.21	\$134.99	\$110.3
CPT CODE		Sigmoidoscopy, flexible fiberoptic fo		\$96.71	\$154.06	\$88.81	\$135.36	\$106.79	\$428.65	N.A.	\$112.90	\$85.96	\$130,15	\$92.90
CPT CODE		Sigmoidoscopy, flexible fiberoptic fo			\$154.06	900.01	\$133.30	\$100.73	7420.00	N.C.	V112.50	405.50	+100.15	702.00
APG#	162	DIAGNOSTIC UPPER GASTROINTES		\$55.87	\$132.33	\$78.16	\$112.89	\$127,41	\$173.91	\$131.99	\$160.88	\$95.71	\$122.04	\$124.6
CPT CODE		Upper GI endoscopy including esoph		\$74.57	\$161.00	\$91.08	\$146.46	\$142.64	\$235.37	\$139.76	\$190.01	\$87.94	\$138.97	\$102.0
CPT CODE		Upper GI endoscopy incl. esophagus			\$101.00	491,00	V140.40	V172.04	72.00.07	+100.70	7.50.01	101.04		
APG#		THERAPEUTIC UPPER GASTROINTE		\$103.00	\$80.78	\$49.38	N.A.	N.A.	\$345.91	N.A.	\$202.82	N.A.	\$110.03	\$41.20
CPT CODE		Upper GI endoscopy including esoph		\$97.29	\$102.22	\$68.62	N.A.	N.A.	N.A.	N.A.	\$144.55	N.A.	\$155.00	\$111.5
CPT CODE		Upper GI endoscopy including esoph			\$102.22	900.02	IV.A.	IN.A.	14.74.	14.74.	V144.55	14.63	¥100.00	V11113
APG#	164	DIAGNOSTIC LOWER GASTROINTES			\$190.07	\$125.20	\$261,90	\$199.00	\$297.59	\$186.23	\$185.00	\$189.13	\$153.13	\$138.0
CPT CODE		Colonoscopy, fiberoptic, beyond spl			\$204.74	\$125.20	\$280.48	\$209.22	\$334.80	\$212.04	\$223.53	\$174.04	\$197.66	\$147.0
CPT CODE		Colonoscopy, fiberoptic, beyond spl	\$184.77		\$204.74	\$129.00	9200.40	9205.22	7334.00	7212.04	V220.00	V174.04	¥107.00	V147.0
APG#	165	THERAPEUTIC LOWER GASTROINTE			\$181.27	\$103.44	\$255.07	\$264.00	\$333.21	\$17.97	\$202.82	N.A.	\$164.84	\$133.7
CPT CODE		Colonoscopy, fiberoptic, beyond spl		\$95.50	\$193.80		\$265.70	\$192.48	\$301.76	\$195.59	\$216.25	\$174.17	\$161.32	\$132.5
CPT CODE		Colonoscopy, fiberoptic, beyond spl ERCP & OTHER MISC. GASTROINTE	\$180.18				9200.70	¥132.40	\$301.70	V133.33	VZ 10.20	V174.17	V101.02	V102.5
APG#	166				\$194.81	\$148.21	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Endoscopic retrograde cholangiopan-			\$194.81	\$45.62	\$441.75	N.A.	N.A.	N.A.	\$173.69	N.A.	\$79.04	\$0.05
CPT CODE		Small intestinal endoscopy beyond s	\$167.19	\$105.77	\$105.40	940.02	9441.75	N.A.	N.A.	14.75.	V173.03	14.70.	773.04	V0.00
APG#	167	TONSIL & ADENOID PROCEDURES	1000 00	1100 50	ADDE 40	\$126.47	\$150.90	\$46.59	\$389.76	\$275.39	\$314.44	\$152.91	\$198.86	\$117.2
CPT CODE		Tonsillectomy and adenoidectomy, a		\$169.53	\$305.46	\$126.47	\$138.37	\$33.11	\$295.64	\$259.48	\$322.83	\$174.15	\$217.26	\$121.3
CPT CODE		Tonsillectomy, primary or secondary		\$132.70	\$305.46	\$120.47	\$130.37	933,11	\$255.04	\$235.40	9322.03	\$174.10	V217.20	V121.0
APG#	168	HERNIA & HYDROCELE PROCEDURE		1105.00	1005 10	\$118.89	\$206.97	\$127.89	\$360.73	\$179.46	\$472.19	\$210.03	\$258,44	\$161.8
CPT CODE		Repair inguinal hernia, age 5 or over		\$135.66	\$285.19	\$118.89	\$210.98	\$127.89	\$324.26	\$189.69	\$385.12	\$167.86	\$267.00	\$167.2
CPT CODE		Repair inguinal hernia, any age recur		\$77.65	\$304.73	\$110.47	\$210.90	\$121.03	9324.20	\$105.05	9300.12	\$107.00	9207.00	V107.2
APG#	169	SIMPLE HEMORRHOID PROCEDURES					*****	\$38,47	\$356.74	\$335.73	\$285.99	\$142.59	\$232.39	\$114.7
CPT CODE		Excision of external hemorrhoid tags		\$89.91	\$266.22	\$163.01	\$133.78	\$38.47	\$594.13	N.A.	\$273.79	\$101.11	\$204.80	\$161.6
CPT CODE	46934	Description of Hemorrhoids, any met	\$156.14	\$94.62	\$272.14	\$155.14	\$133.78	\$38.47	\$594.13	N.A.	92/3./5	3101.11	\$204.00	\$101.0
APG#		SIMPLE ANAL & RECTAL PROCEDU						N.A.	N.A.	N.A.	\$188.25	N.A.	\$79.08	N.A.
CPT CODE		Removal of fecal impaction or foreig		\$23.81	\$236.19	\$66.32	N.A.	\$55.39	\$470.02	N.A.	\$253.68	\$86.63	\$217.23	\$134.9
CPT CODE		Fissurectomy, with or without sphin		\$54.17	\$225.02	\$93.15	\$121.82	\$55.39	\$470.02	N.A.	\$203.00	900.03	9217.23	9134.3
APG#	171	COMPLEX ANAL & RECTAL PROCEE					*****		\$457.81	\$368.28	\$267.54	\$11.49	\$136.57	\$16.2
CPT CODE		Excision of Rectal tumor, transanal a		\$297.65	\$333.32	\$180.92	\$106.58	N.A.			\$315.61	\$117.74	\$136.57	\$132.9
CPT CODE		Hemorrhoidectomy internal and exte	\$1/5.56	\$72.99	\$279.42	\$129.76	\$142.29	\$30.94	\$534.53	\$344.06	9315.61	9117.74	9248.87	9132.5
APG#	172	PERITONEAL PROCEDURES & CHAN				477.00	100 11	101.00		11.4	\$115.42	N.A.	\$131.69	\$106.9
CPT CODE		Change of Gastrostomy Tube	\$134.10	\$59.16	\$86.53	\$77.30	\$28.44	\$21.28	N.A.	N.A.				N.A.
CPT CODE		Peritoneocentesis, abdominal parace	\$104.09	\$59.37	\$196.19	\$145.84	\$78.73	\$17.02	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	173	MISC. DIGESTIVE PROCEDURES			1				4404 40				450.00	110
CPT CODE		Percutaneous placement of gastrost		\$126.30	\$183.62	\$31.20	N.A.	N.A.	\$481.49	N.A.	\$115.42	N.A.	\$56.08	N.A.
CPT CODE		Insertion of intraperitoneal cannula o		\$134.18	\$182.37	\$19.85	N.A	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	183	SIMPLE URINARY STUDIES & PROC	EDURES											

APG#

212 SIMPLE PENILE PROCEDURES

## MEAN AND STANDARD DEVIATION FOR TOTAL INDIRECT COSTS BY FACILITY TYPE AND VOLUME - SURGICAL PROCEDURES Total Indirect Costs A.S.C. Hospital Volume Volume Volume Volume Volume (3000-5999) (6000+) (1000,2999) (3000-5999) (60000 + 1)(1000-2999) Standard Standard SURGICAL Mean Mean Mean Deviation Mean Deviation PROCEDURES APG AND CPT DESCRIPTION Mean Deviation CPT CODE 51720 Bladder instillation of anticarcinogeni \$60.96 \$131.47 \$24.70 \$139.60 NΔ NA. \$356.17 N.A. N.A. N.A. N.A CPT CODE 51725 Simple cystometrogram (CMG) (e.g., \$200.11 N.A \$134.45 184 88 \$85.29 \$39.12 N.A. NA N.A. NA. N.A. N.A. \$86.50 \$36.07 ΝΔ N.A. ΝΔ NΑ NA NA. N.A N.A 51736 Simple uroflowmetry (UFR) (e.g., sto \$200.11 184 RENAL EXTRACORPOREAL SHOCK WAVE LITHOTRIPSY APG# \$114.99 CPT CODE 50590 Lithotripsy, extracorporeal shock wa \$250.91 | \$153.41 \$171 91 NA. N.A. N.A. N.A \$973.94 N.A. APG# 185 URINARY CATHETERIZATION & DILATATION 4419 28 ΝΔ ΝΔ 51010 Aspiration of bladder; by trocar or in \$115.89 \$56.60 \$17.35 \$106.58 N.A. CPT CODE \$58.72 NΔ NΔ ΝΔ \$165.39 \$91.29 \$182.05 NA 53660 Dilation of female urethra including s \$186.93 \$176.31 CPT CODE CPT CODE 53670 Catheterization, urethra simple \$117.43 \$56.59 \$80.89 \$74.89 \$26.81 ΝΔ ΝΔ ΝΔ \$42.57 N.A. \$25.40 N.A 186 HEMODIALYSIS CPT CODE ΝΔ NΔ \$288.07 NA \$299.20 \$183.48 NA NA N.A N.A N.A. N.A 90935 Hemodialysis procedure with single N.A NΔ ΝΔ ΝΔ \$428 94 N.A. N.A. N.A. N.A. N.A. N.A. 90937 Hemodialysis procedure requiring rep 187 PERITONEAL DIALYSIS APG# CPT CODE 90945 Dialysis procedure other than hemod ΝΔ N A N.A. N.A. \$534.03 N.A. N.A. N.A. NΔ \$798.90 NΛ NΔ NΔ ΝΔ NΔ CPT CODE 90947 Dialysis procedure other than hemod NA NA. N.A. N.A N.A. 188 SIMPLE CYSTOURETHROSCOPY CPT CODE 52000 Cystourethroscopy (separate proced \$121.82 \$60.86 \$191,45 1132 35 \$134.14 \$87.23 \$262.00 \$118.66 \$66.74 \$211.40 \$68.47 52281 Cystourethroscopy, with calibration \$161.90 \$103.72 \$197.84 \$76.30 \$142.15 NΔ ΝΔ \$255.52 \$69.37 \$290.86 \$98.26 CPT CODE 189 COMPLEX CYSTOURETHROSCOPY & LITHOLAPAXY APG# CPT CODE 52224 Cystourethroscopy, w/ fulguration or \$157.35 | \$70.42 | \$215.26 | \$107.33 \$181.36 \$105.76 \$428.65 N.A \$161.22 \$296.60 \$186.74 \$91.70 52234 Cystourethroscopy, w/fulguration an \$163.98 \$79.49 \$218.55 \$99.37 190 PERCUTANEOUS RENAL ENDOSCOPY, CATHETERIZATION & URETERAL END 50392 Introduction of intracatheter or cath | \$174.07 | \$156.40 | \$192.49 490 B2 NΔ ΝΔ ΝΔ N.A. CPT CODE N.A. N.A. ΝΔ \$214.88 ΝΔ ΝΔ ΝΔ N A N.A. N.A N.A CPT CODE 50393 Introduction of ureteral catheter or s \$180.70 \$95.40 CPT CODE 50953 Ureteral endoscopy through establis \$190.59 \$94.09 \$222.70 \$43.56 \$130.51 NΑ N.A. NΔ \$261.50 N.A. N.A NA APG# 191 CYSTOTOMY 51020 Cystotomy or cystostomy; with fula \$157.27 \$107.65 \$233.89 NA \$90.62 N.A. A IA N.A. 51040 Cystostomy; cystotomy with draina \$131,65 \$99.05 \$195.82 \$44.52 \$98.60 N.A. N A NΔ NΔ NΔ NΔ \$294.55 \$158 55 ΝΔ ΝΔ 51045 Cystostomy w/insertion of ureteral c \$179.23 \$105.37 \$238.77 \$34.76 \$98.60 N.A. N.A. APG# 192 SIMPLE LIBETHRAL PROCEDURES \$106.58 NΑ \$428 65 ΝΔ \$244.61 \$91.70 ΝΔ NΔ CPT CODE 53200 Bionsy of urethra \$209.06 \$178.31 \$176.15 \$57.64 53265 Excision or fulguration; urethral, car \$207.55 \$183.81 \$176.15 \$74.67 NΑ \$428.65 ΝΔ \$234.09 \$78.84 N.A. N.A. CPT CODE 193 COMPLEX URETHRAL PROCEDURES 53220 Excision or fulguration of carcinoma | \$217.77 | \$198.13 | \$173.87 \$249.16 \$106.72 CPT CODE \$74.67 N.A. N.A. N.A. N.A. N.A. 53235 Excision of urethral diverticulum (se \$177,74 \$105.70 \$213.24 N.A. \$293.06 N.A. N.A. N.A. CPT CODE \$106.58 209 TESTICULAR EPIDIDYMAL PROCEDURES APG# \$246 51 \$183.41 \$317.60 \$90.47 \$222.36 | \$151.09 54520 Orchiectomy, simple, w/ or w/o testi \$169.02 \$89.31 \$152.94 \$134.05 \$130.75 | \$249.83 | \$195.47 \$208.73 \$326.57 \$132.24 NΔ NΔ \$295.27 CPT CODE 54521 Orchiectomy, simple w/ or w/o testi \$263.68 210 INSERTION OF PENILE PROSTHESIS APG# 54400 Insertion of penile prosthesis: non-in \$302.41 \$163.23 \$337.90 \$87.95 \$298.02 N.A ΝΔ ΝΔ \$84.89 N.A. N.A. CPT CODE \$180.18 54405 Insertion of inflatable (multi-compon \$304.05 | \$199.88 \$435.34 \$298.02 N.A. N.A. N.A. \$518.26 \$43.50 N.A. N.A. 211 COMPLEX PENILE PROCEDURES APG# 54402 Removal or replacement of non-infla \$162.68 \$462.18 \$142.22 \$106.58 ΝΔ ΝΔ CPT CODE \$97.32 NΔ NΔ CPT CODE 54407 Removal, repair or replacement of in \$174.51 \$92.33 \$419.23 \$202.96 \$82.65 N'A N.A NA \$283.19 \$76.94 ΝΔ N A

	MEAN	AND STANDARD DEVIATION	FOR TO	TAL INDI	RECT CO	STS BY F	ACILITY			/IE - SURC	SICAL PR	OCEDUR	ES	
								Total Indi	rect Costs					
					Ho	spital					Α.:	s.c.		
			Vo	lume	Vo	lume	Vol	lume	Vo	lume	Vol	lume	Vo	lume
			(1000	)-2999)	(3000	-5999)	(60)	00+)	(1000	-2999)	(3000	-5999)	(60	00+)
SURGICAL				Standard		Standard		Standard		Standard		Standard		Standard
PROCEDURES		APG AND CPT DESCRIPTION	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation	Mean	Deviation		Deviation
CPT CODE	54152	Circumcision, clamp procedure exce	\$374.18	\$388.28	\$272.86	\$83.78	\$114.55	N.A.	\$234.86	\$157.06	\$177.97	\$145.47	\$48.41	N.A.
CPT CODE	54161	Circumcision, surgical excision other	\$252.82	\$221.12	\$268.31	\$139.04	\$104.26	\$30.57	\$375.10	\$228.35	\$289.84	\$168.18	\$232.80	\$135.75
APG#	213	PROSTATE NEEDLE & PUNCH BIOPS	Y							1				
CPT CODE	55700	Biopsy, prostate needle or punch sin	\$161.74	\$145.02	\$173.66	\$68.54	\$88.12	\$27.74	\$345.91	N.A.	\$196.59	\$74.39	\$131.69	\$106.93
CPT CODE	55705	Biopsy, prostate incisional, any appr	\$155.19	\$122.61	\$143.86	\$33.28	\$82.65	N.A.	\$304.54	N.A.	\$155.74	\$71.85	\$48.41	N.A.
APG#	214	TRANSURETHRAL RESECTION OF PI	ROSTATE	& OTHER PR	ROSTATE P	ROCEDURE								
CPT CODE	52500	Transurethral resection of bladder ne	\$224.52	\$149.66	\$218.81	\$47.01	\$227.76	\$171.38	\$511.38	N.A.	\$292.63	\$108.99	\$293.16	N.A.
CPT CODE	52601	Transurethral resection or prostate, i	\$160.12	\$61.79	\$395.32	\$297.40	\$358.99	\$379.53	N.A.	N.A.	\$633.86	N.A.	N.A.	N.A.
APG#	236	PROCEDURES FOR PREGNANCY & N	EONATAL	CARE									1	
CPT CODE		Fetal non-stress test	N.A.	N.A.	\$256.02	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Initiation and/or supervision of intern	N.A.	N.A.	\$58.36	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	237	PROCEDURES FOR PREGNANCY & N	EONATAL	CARE									1	
CPT CODE	59801	Treatment of spontaneous abortion,	\$187.78	\$157.96	\$136.09	\$46.66	\$142.53	\$73.19	\$272.65	\$145.74	\$111.83	\$56.63	\$160.25	\$95.35
CPT CODE		Treatment of missed abortion, any tr		\$174.80	\$150.17	\$74.93	\$160.08	\$48.37	\$275.85	\$166.37	\$224.73	\$126.45	\$154.04	\$65.63
APG#	238	THERAPEUTIC ABORTION			1									
CPT CODE	59840	Legal (therapeutic ) abortion, by dilat	\$157.51	\$129.53	\$169.88	\$93.81	\$194.28	N.A.	\$181.17	\$169.80	\$254.30	\$202.31	\$155.64	N.A.
CPT CODE		Legal (therapeutic) abortion, by dilati		\$194.70	\$174.39	\$105.99	\$194.28	N.A.	\$308.77	\$277.97	\$166.73	\$72.57	\$111.46	\$62.48
APG#	240	FEMALE GENITAL ENDOSCOPY												
CPT CODE	58980	Laparoscopy for visualization of pelv	\$298.64	\$245.29	\$332.70	\$180.90	\$257.10	\$159.95	\$429.08	\$268.69	\$445.78	\$206.28	\$263.53	\$132.84
CPT CODE		Laparoscopy for visualization of pelv		\$256.46	\$294.87	\$179.03	\$257.10	\$159.95	\$381.54	\$188.02	\$408.50	\$192.38	\$272.33	\$117.89
APG#	241	COLPOSCOPY												
CPT CODE	57452	Colposcopy (vaginoscopy); (separate	\$277.95	\$240.30	\$183.35	\$63.91	\$114.18	N.A.	\$519.68	\$128.74	\$270.21	\$188.28	\$138.15	\$103.86
CPT CODE	57454	Colposcopy (vaginoscopy); with biop	\$250.09	\$181.82	\$198.55	\$91.96	\$123.99	\$13.88	\$470.02	N.A.	\$211.90	\$74.64	\$82.81	\$16.12
APG#	242	MISC. FEMALE REPRODUCTIVE PRO	CEDURES											
CPT CODE	56600	Sippsy of vulva (separate procedure)		\$154.89	\$209.49	\$99.40	\$96.29	\$41.85	\$462.95	\$107.03	\$284.19	\$227.21	\$174.82	\$115.63
CPT CODE	57520	Biopsy of cervix, circumferential (co	\$161.24	\$141.96	\$190.79	\$66.07	\$158.00	\$85.16	\$297.72	\$179.62	\$302.28	\$190.47	\$185.65	\$105.82
APG#	243	DILATION & CURETTAGE												
CPT CODE	57820	Dilation and curettage of cervical stu	\$174.44	\$132.55	\$237.37	\$111.43	\$144.86	\$78.00	N.A.	N.A.	\$86.27	N.A.	\$150.68	\$122.94
CPT CODE	58120	Dilation and curettage, diagnostic an	\$215.07	\$144.67	\$210.60	\$101.49	\$108.13	\$29.62	\$305.61	\$166.65	\$256.17	\$132.42	\$184.94	\$94.16
APG#	244	FEMALE GENITAL EXCISION & REPA	IR											
CPT CODE	56620	Vulvectomy: partial, unilateral or bila	\$243.05	\$202.99	\$183.27	\$29.79	\$164.09	\$54.04	\$140.61	N.A.	\$305.47	\$154.34	\$223.64	\$125.85
CPT CODE	57135	Excision of vaginal cyst or tumor	\$198.49	\$148.93	\$203.37	\$101.59	\$110.38	\$5.37	\$462.95	\$107.03	\$239.32	\$167.03	\$130.17	\$89.97
APG#		ELECTROENCEPHALOGRAM												
CPT CODE	95819	Electroencephalogram (EEG) includin	N.A.	N.A.	\$89.91	\$9.32	\$110.82	\$26.17	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE	95828	Polysomnography (recording, analysi	\$995.65	N.A.	N.A.	N.A.	\$441.69	\$247.04	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#		ELECTROCONVULSIVE THERAPY												
CPT CODE		Electroconvulsive therapy (includes	N.A.	N.A.	N.A.	N.A.	\$50.07	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Electroconvulsive therapy (includes	N.A.	N.A.	N.A.	N.A.	\$50.07	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	263	NERVE & MUSCLE TESTS												
CPT CODE		Nerve conduction, velocity and/or la	N.A.	N.A.	\$41.67	N.A.	\$10.88	\$3.47	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
CPT CODE		Nerve conduction, velocity and/or la	\$46.63	N.A.	\$41.67	N.A.	\$10.88	\$3.47	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
APG#	264	INJECTION OF SUBSTANCE INTO SE											1	
CPT CODE		Injection of anesthetic substance (in	\$69.87	\$53.37	\$97.06	\$25.82	\$115.36	\$67.87	\$269.89	\$68.01	\$149.33	\$87.79	\$178.94	\$67.04
				N.A.	\$142.21	\$42.73	\$90.77	N.A.						
CPT CODE	62289	Injection of substance other than an	N.A.	N.A.	\$142.21	\$42.73	\$90.77	N.A.	\$161.32	\$129.68	\$201.95	\$112.22	\$253.83	N.A.

## MEAN AND STANDARD DEVIATION FOR TOTAL INDIRECT COSTS BY FACILITY TYPE AND VOLUME - SURGICAL PROCEDURES 4 Total Indirect Costs Hospital ASC Volume Volume Volume Volume (1000,2999) 13000-59991 (6000+) (1000-2999) (3000-5999) (6000 +) SURGICAL Standard Standard Standard Standard PROCEDURES APG AND CPT DESCRIPTION Mean Deviation Mean Deviation Mean Deviation Mean Mean Deviation Mean Deviation CPT CODE 62225 Replacement or irrigation, ventricular NA NA ΝΔ NA \$82.65 NΔ N A N.A N.A. CPT CODE 63744 Replacement, irrigation or revision of ΝΔ NΔ \$499.81 ΝΔ \$154.44 N.A. N.A N.A. N.A N.A. APG# 266 NERVE IN JECTION & STIMULATION 64510 Injection, anesthetic agent; stellate \$89.51 NA \$153.66 \$74.56 ΝΔ \$251.61 \$151.88 \$68.23 \$216.82 ΝΔ 64520 Injection, anesthetic agent; lumbar o \$62.03 \$28.77 \$9.38 \$158.89 \$6.30 \$652.90 ΝΔ \$199.40 \$118.77 \$13.47 267 REVISION & REMOVAL OF NEUROLOGICAL DEVICE CPT CODE 63660 Revision or removal of spinal neurost N.A. N A \$206.71 N.A \$175.27 \$29.46 N.A. N.A. \$115.42 NA ΝΔ NΑ CPT CODE 63688 Revision or removal of spinal neurost \$116,47 NΔ ΝΔ \$169.42 \$21.18 N.A. \$202.82 N.A. NA ΝΔ NΑ APG# 268 NEUROSTIMULATOR AND VENTRICULAR SHUNT IMPLANTATION CPT CODE 63650 Percutaneous implantation of neuros \$220.32 NΑ ΝΔ ΝΔ ΝΔ N A N.A N.A. N.A. 64560 Percutaneous implantation of neuros N.A. N.A. N.A. NΑ \$154.44 ΝΔ ΝΔ ΝΔ NΔ N.A. \$109.77 N.A. 269 CARPAL TUNNEL RELEASE CPT CODE 64721 Neuroplasty and/or transposition; me \$323.65 \$334.85 \$273.27 \$100.80 \$150.99 \$37.06 \$402.42 \$255.69 \$332.56 \$296.01 \$220.85 270 NERVE REPAIR & DESTRUCTION 64718 Neuroplasty and/or transposition uln \$444.10 \$530.93 \$68.48 \$180.86 \$630.80 \$473.35 \$565.06 \$246.98 \$291.68 \$257.26 64719 Neuroplasty and/or transposition; uln \$367.37 \$262.04 \$272.88 \$89.98 \$180.86 \$771.05 \$601.23 \$429.92 \$99.59 \$355.41 | \$215.14 271 COMPLEX NERVE REPAIR 64831 Suture of digital nerve, hand or foot: \$292.79 \$122.61 \$315.42 \$78.49 \$145.75 \$21.55 \$470.02 \$457.58 \$484.04 \$306.23 \$288.68 64834 Suture of one nerve, hand or foot: c \$232.42 \$90.55 \$319.71 \$71.66 \$145.75 \$594.13 \$21.55 NA \$260.21 \$85.42 \$306.23 \$288.68 APG# 272 SPINAL TAP 62270 Spinal puncture, lumbar, diagnostic \$77.03 \$17.65 \$103.76 N A N.A N.A. ΝΔ ΝΔ CPT CODE 62272 Spinal puncture, therapeutic, for drail N.A. NΔ \$85.25 \$3.94 \$74.67 N.A. N.A. N.A. N.A. N.A ΝΔ 287 MINOR OPTHALMOLOGICAL TESTS & PROCEDURES 92235 Ophthalmoscopy, with medical diag N.A. N A NA \$50.56 ΝΔ ΝΔ N.A. N.A. N.A. APG# 289 SIMPLE LASER EYE PROCEDURES 65855 Trabeculoplasty by laser surgery, on \$38.58 \$142.53 N.A \$265.43 \$66.86 \$39.25 \$78.97 NΔ \$57.14 66821 Discission of secondary membraneo \$132.33 \$95.86 \$275.46 \$129.93 \$109.01 \$56.80 \$150.75 \$45.50 \$80.14 \$196.05 \$113.81 APG# 290 | COMPLEX LASER EYE PROCEDURES 67105 Repair of retinal detachment, one or \$860.70 ΝΔ \$295 77 \$202.30 \*\*\*\*\* N.A. \$793.81 \$341.29 ΝΔ CPT CODE 67228 Destruction of extensive or progressi \$259.79 \$12.13 \$132.94 \$37.28 \$78.97 N.A. \$125.94 \$97.30 N.A NΑ 291 CATARACT PROCEDURES APG# 66850 Removal of lens material; phacofrag \$337.01 CPT CODE \$279.09 \$299.58 \$113.99 \$116.98 \$47.05 \$463.51 \$190.29 \$279.19 \$146.72 \$139.08 N.A. 66940 Extraction of lens with or without iri \$206.90 \$151.12 \$223.37 \$103.56 \$77.52 \$21.93 \$373.93 \$176.35 \$338.00 \$154.66 \$238 58 | \$196 22 66983 Intracapsular cataract extraction wit \$297.82 \$255.62 | \$417.17 | \$174.06 | \$145.81 \$97.08 \$458.85 \$1.75.39 \$143.19 \$270.27 \$248 68 66984 Extracapsular cataract removal with \$303.87 \$265.59 \$369.56 \$161.95 \$215.58 \$145.68 \$396.07 | \$204.67 \$456.37 \$282.16 66985 Insertion of intraocular lens subsequ | \$293.02 \$240.64 \$205.41 \$87.12 \$66.89 \$25.63 \$398.53 | \$204.45 | \$330.48 | \$177.90 | \$212.73 | \$127.86 292 SIMPLE ANTERIOR SEGMENT BY PROCEDURES FOR GLAUCOMA CPT CODE 66500 Iridotomy by stab incision (separate | \$247.77 | \$271.35 | \$201.56 \$7.28 \$50.74 \$174.15 \$165.75 \$29.99 \$56.08 CPT CODE 66720 Cyclocryotherapy initial \$438,47 \$163,42 \$206.71 N.A. \$82.65 ΝΔ \$150.23 \$28.64 N.A. N.A APG# 293 COMPLEX ANTERIOR SEGMENT EYE PROCEDURES FOR GLAUCOMA 66150 Fistulization of sclera for glaucoma: \$114.64 \$106.58 \$610.57 \$23.24 \$170.48 N.A N.A. N.A 66170 Fistulization of sclera for glaucoma t N.A. ΝΔ \$346.78 \$99.26 \$114.10 \$532.28 \$255.59 \$553.55 \$322 44 N A ΝΔ APG# 294 SIMPLE ANTERIOR SEGMENT EYE PROCEDURES EXCEPT FOR GLAUCOMA CPT CODE 65450 Destruction of lesion of cornea by cr \$124.18 \$117.70 \$106.58 N'A \$351.18 NΔ \$92.95 \$79.08 N.A. CPT CODE 66820 Discussion or secondary membraneo \$193,46 \$216.58 \$321.50 \$162.34 \$50.74 N.A \$309.50 | \$165.33 | \$157.51 \$18.34 N.A.

MEAN AND STANDARD DEVIATION FOR TOTAL INDIRECT COSTS BY FACILITY TYPE AND VOLUME - SURGICAL PROCEDURES Total Indirect Costs A.S.C. Hospital Volume Volume Volume Volume Volume Volume (3000-5999) (1000-2999) (6000 + 1 (1000,2999) 13000-59991  $(60000 \pm 1)$ Standard Standard SURGICAL Standard Standard Standard Deviation Deviation Mean Deviation Mean Deviation Mean Deviation PROCEDURES APG AND CPT DESCRIPTION Mean Deviation Mean Mean APG# 295 MODERATE ANTERIOR SEGMENT EYE PROCEDURES \$195.64 \$53.31 \$94.43 CPT CODE 66625 Iridectomy, w/corneoscleral or corne \$47,23 \$201.56 \$7.28 \$82.65 ΝΔ \$273.30 \$188 59 N.A. N.A. 19113 \$50.74 NΔ N.A. N.A. N.A. N.A. 66830 Removal of secondary membraneous \$159.40 \$126.90 CPT CODE 296 COMPLEX ANTERIOR SEGMENT EYE PROCEDURES EXCEPT FOR GLAUCOMA APG# 65750 Keratoplasty, penetrating, includes a N.A. \$206.71 NΔ \$106.58 \$658.17 \$317.12 \$447.27 \$276.36 \$308.53 CPT CODI \$304.72 \$224.84 \$254.59 \$183 13 67010 Removal of vitreous, anterior approa \$306.11 | \$293.18 \$329.11 \$114.61 \$50.74 N.A. \$550.72 CPT CODE 297 SIMPLE POSTERIOR SEGMENT EYE PROCEDURES \$82.65 NΔ ΝΔ ΝΔ NΔ 67208 Destruction of localized lesion of retil N.A. N A \$345.76 \$133.71 \$251.21 N.A. \$106.58 N.A. ΝΔ \$159.12 ΝΔ N.A. N.A. 67227 Destruction of extensive or progressi N.A. N.A. 298 COMPLEX POSTERIOR SEGMENT EYE PROCEDURES APG# \$606.37 \$419.35 \$13.46 67036 Vitrectomy, mechanical, pars plana \$219.33 \$190.34 \$231.36 ΝΔ \$646.54 \$600.74 \$111.61 CPT CODE \$681,19 67101 Repair of retinal detachment, one or \$595.29 NΔ ΝΔ \$202.30 N.A. \*\*\*\*\* N.A. N.A. 299 STRASISMUS & MUSCLE EYE PROCEDURES A PG# \$132.10 \$326.94 \$200.88 \$195.83 \$169.22 CPT CODE 67311 Strabismus surgery on patient not or \$288.46 \$218.55 \$249.10 \$81.72 \$130.51 N.A \$439.05 67312 Strabismus surgery on patient not pr \$294.96 \$274.43 \$236.90 \$67.21 \$130.51 N.A. 4238 54 \$465.88 \$265.97 \$148.67 300 SIMPLE REPAIR & PLASTIC PROCEDURES OF EYE APG# 67840 Excision of lesion of eye lid without \$256.30 \$282.66 \$154.48 \$154.44 \$372.91 \$234.35 \$142.77 \$71.00 \$174.61 \$139.71 CPT CODE \$10.94 N.A 67921 Repair of entropion suture \$318.45 | \$422.88 | \$239.96 \$80.07 \$82.65 NΔ \$394.79 \$171.82 \$359.39 \$169.38 \$300.06 \$164.85 301 COMPLEX REPAIR & PLASTIC PROCEDURES OF EYE APG# \$198.34 \$150.03 \$35.26 67904 Repair of blepharoptosis (tarso)-levat \$382.69 | \$458.35 \$455.46 \$255.30 \$390.90 \$334.40 \$531.46 \$322.68 \$374.05 CPT CODE 68720 Dacryocystorhinostomy (fistulization \$622.57 | \$658.62 \$185.96 | \$507.62 | \$431.79 \$862.95 \$315.53 \$710.95 \$473.20 313 OTORHINOLARYNGOLOGIC FUNCTION TESTS APG# NΔ ΝΔ NΔ N.A 92545 Oscillating tracking test, with record \$34.54 N.A. N.A. N.A N.A. N.A NΔ \$53.96 N.A. \$100,13 N.A. NΔ NΔ ΝΔ ΝΔ N.A N.A. 92585 Brainstem evoked response recordin | \$92.11 N.A. 314 MAJOR EXTERNAL EAR PROCEDURES 69140 Excision exostosis (es), external audil \$156.41 | \$101.50 | \$198.31 \$86.76 CPT CODE \$30.09 \$122.09 \$511.38 N.A. \$173.69 \$106.58 \$246.54 NΔ \$661.87 NΔ CPT CODE 69310 Reconstruction of external auditory \$250.98 \$75.36 \$325.80 \$210.37 N.A. N.A. N.A. APG# 315 TYMPANOSTOMY & OTHER SIMPLE MIDDLE EAR PROCEDURES \$54.58 69420 Myringotomy including aspiration an \$183.80 \$141.35 \$148.98 \$19.89 \$197.08 | \$212.50 \$348.67 \$168.55 \$72.79 \$108,29 \$45.29 CPT CODE \$74.74 \$22.66 \$183.56 \$93.27 \$148 57 \$57.09 \$128 24 | \$118 60 69433 Tympanostomy (requiring insertion o \$104.87 \$76.37 \$117.70 N.A. CPT CODE APG# 316 TYMPANOPLASTY & OTHER COMPLEX MIDDLE EAR PROCEDURES 69631 Tympanoplasty w/o mastoidectomy | \$270.18 | \$141.19 | \$537.04 \$430.22 \$251.86 \$696.45 \$665.62 \$400.58 \$156.04 \$339.26 | \$237.12 CPT CODE 69660 Stapedectomy with re-establishment \$530.26 \$301.20 \$689.99 \$447.67 \$251.86 \$70.10 N.A. N.A. \$377.65 N.A. \$465.99 | \$441.18 CPT CODE APG# 317 INNER FAR PROCEDURES CPT CODE 69806 Endolymphatic sac operation: with s \$688.45 ΝΔ \$295.71 NA \$154.44 N.A. N.A. N.A N.A \$368 27 NΔ N.A. 69840 Revision fenestration operation ΝΔ ΝΔ N.A. N.A. \$154.44 N.A. N.A. N.A. 318 SIMPLE AUDIOMETRY APG# \$31.84 NΑ ΝΔ NΑ NΑ N.A. N.A. N.A. 92557 Basic comprehensive audiometry \$81.05 1,99 ΝΔ NΔ ΝΔ N.A. N.A. N.A. N.A. N.A. CPT CODE 92567 Tympanometry 9.21 NΔ 319 REMOVAL OF IMPACTED CERUMEN APG \$145.92 \$84.36 488 56 \$67.63 69210 Removal impacted cerumen (separat \$192.13 \$215.39 \$88.03 N.A. \$66.77 \$263.16 \$212.65 \$154.87 \$230.23 \$107.82 \$146.81 \$410.91 \$214.44 \$275.36 \$150.51 \$187.58 \$129.21 AGGREGATE MEAN FOR ALL SURGICAL PROCEDURES

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